### JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to com	plete this form.	1 Filer ID (Ethics Commi 00084317	· · ·	2 Total pages	filed: 58
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		
OFFICEHOLDER NAME	The Honorable	Brittanye L.			Date Received	USE ONLY
					ELECTRONI	CALLY FILED
					07/17/2023	
	NICKNAME	LAST		SUFFIX	0111112023	
		Morris				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	ΓY;	ZIP CODE	Date Hand-delivere	d or Date Postmarked
OFFICEHOLDER	17503 Teal Forest Ln					
MAILING ADDRESS					Receipt #	Amount
	Lisuates TV 77070					
Change of Address	Houston, TX 77379				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER	Mr.	Adolf R.				
NAME						
	NICKNAME	LAST			SUFFIX	
		Morris				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PC	) BOX PLEASE);	AP	r / SUITE #; CITY;	S	TATE; ZIP CODE
ADDRESS	17503 Teal Forest Lane					
(Residence or Business)						
(Residence of Business)	Spring, TX 77379					
7 CAMPAIGN	AREA CODE PHO	NE NUMBER	EXTENSION			
TREASURER PHONE	(713) 569-6966					
THOME						
8 REPORT						
TYPE	January 15	30th day befor	e election	Runoff		campaign treasurer officeholder only)
	X July 15	8th day before		Exceeded modified		Attach C/OH-FR)
	X July 15	our day before		reporting limit		
	Marstle Davis Marst			Marth		
9 PERIOD COVERED	Month Day Year	т	HROUGH	Month Day	Year	
	01/01/2023	11	пкоодп	06/30/2023	3	
10 ELECTION	ELECTION DATE			ELECTION TYPE	<b>—</b>	
	Month Day Year		Primary	Runoff	Other	
			General	Special		
				_		
11 OFFICE	OFFICE HELD (if any)	1		12 OFFICE SOUGHT	(if known)	
	District Judge District 333	Harris			. /	
		GO <sup>-</sup>	TO PAGE 2			
Forms provided by Te	xas Ethics Commission	www.e	thics.state.tx.u	S	Ver	sion V3.5.1.a18ea2ca

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

FORM JC/OH COVER SHEET PG 2 2 of 58

I

13 C / OH NAME	Morris, Brittanye L. (	The Honorable)		14 Filer ID 00084317	(Ethics Co	mmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder	political contributions accepte These expenditures may ha d officeholders are required to	ve been made without	the candidate's or off	ficeholder's k	nowledge or
Additional Pages	COMMITTEE TYPE COMMITTEE NAME					
	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN	TREASURER NAME			
		COMMITTEE CAMPAIGN	TREASURER ADDRE	SS		
16 CONTRIBUTION	1. TOTAL UNITEN	IZED POLITICAL CONTRIB	UTIONS(OTHER THAI	N PLEDGES, LOANS	5,	
TOTALS	OR GUARANTE	ES OF LOANS, OR CONTR	IBUTIONS MADE ELE	CTRONICALLY)	\$	0.00
		<b>ICAL CONTRIBUTIONS</b> PLEDGES, LOANS, OR GU	ARANTEES OF LOAN	S)	\$	80,508.94
EXPENDITURE TOTALS	· · · · ·	IIZED POLITICAL EXPENDIT		,	\$	0.00
	4. TOTAL POLIT	ICAL EXPENDITURES			\$	27,762.41
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING P	CAL CONTRIBUTIONS MAIN	TAINED AS OF THE L	AST DAY OF THE	\$	103,344.19
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			\$	0.00	
17 AFFIDAVIT		true and	or affirm, under penalt correct and includes a tle 15, Election Code.			
			The Honor	able Brittanye L. N	1orris	
			Signature of	f Candidate or Officel	holder	
AFFIX NO	TARY STAMP / SEAL AE	OVE				
		aid ertify which, witness my hanc		, this the		day
Signature of offic	cer administering oath	Printed name of officer	administering oath	Title of offi	cer administe	ering oath
Forms provided by Te	xas Ethics Commissio	n www.ethics.s	tate.tx.us		Version \	/3.5.1.a18ea2ca

### SUBTOTALS - JC/OH

### FORM JC/OH COVER SHEET PG 3

3 of 58

18 FILER NAM Morris, Bri	IE ttanye L. (The Honorable)	<b>19</b> Filer ID 00084317	(Ethics Commission Filers)
20 SCHEDULE			
NAME OF S	SUBTOTAL AMOUNT		
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		<b>\$</b> 79,950.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		<b>\$</b> 558.94
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	5	<b>\$</b> 26,343.41
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		<b>\$</b> 1,419.00
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

The Instruc	tion Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 1/14 Rpt: 4/58
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Morris, Brittar	nye L. (The Honorable)		00084317
4 Date	5 Full name of contributor 🔲 out-of-state PAC (ID#	#:)	7 Amount of Contribution (\$)
06/30/2023	AZA Law		\$5,000.00
İ	6 Contributor address; City; State; Zip Code		1
	Houston, TX 77010		
8 Contributor's P	rincipal Occupation	9 Contributor's Job Title	
			//f \
10 Contributor's er	nployer/law firm	<b>11</b> Law firm of contributor's sp	oouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor Out-of-state PAC (ID#	4. Y	Amount of Contribution (\$)
06/26/2023	Altsuler, Kent (Mr.)	+)	\$300.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77057-4402		
Contributor's P	rincipal Occupation	Contributor's Job Title	I
attorney		attorney	
Contributor's er	nployer/law firm	Law firm of contributor's sp	oouse (if any)
Lewis Brisboi	s Bisgaard & Smith, LLP		
If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor 🛛 out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
06/28/2023	Ammons, Robert		\$2,500.00
	Contributor address; City; State; Zip Code		
	houston TX 77006		
Contributor's D	houston, TX 77006 rincipal Occupation	Contributor's Job Title	
attorney		attorney	
	nployer/law firm	Law firm of contributor's sp	pouse (if any)
	Law Firm LLP		
If contributor is	a child, law firm of parent(s) (if any)		
Forme provided b	v Texas Ethics Commission www.eth	ics.state.tx.us	Version V3.5.1.a18ea2ca

The Instruct	ion Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 2/14 Rpt: 5/58
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Morris, Brittan	ye L. (The Honorable)		00084317
4 Date 5 06/30/2023	Full name of contributor     Image: Out-of-state PAC (ID#:)       Arnold & Itkin LLP     Image: Out-of-state PAC (ID#:)		7 Amount of Contribution (\$) \$10,000.00
6	Contributor address; City; State; Zip Code		
	houston, TX 77007		
8 Contributor's Pri	ncipal Occupation	9 Contributor's Job Title	
10 Contributor's em	ployer/law firm	11 Law firm of contributor's sp	oouse (if any)
<b>12</b> If contributor is a	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/26/2023	Bryant J.D., Brad (Mr.)		\$500.00
	Contributor address; City; State; Zip Code		•
	Houston, TX 77024		
	ncipal Occupation	Contributor's Job Title	
attorney		attorney	
Contributor's em		Law firm of contributor's sp	oouse (if any)
Terry Bryant &	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/30/2023	Callier, Joseph		\$250.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77056		
Contributor's Pri	ncipal Occupation	Contributor's Job Title	I
attorney		attorney	
Contributor's em	ployer/law firm	Law firm of contributor's sp	oouse (if any)
Callier Law Gr	oup PLLC		
If contributor is a	a child, law firm of parent(s) (if any)		
	/ Texas Ethics Commission www.ethics	s.state.tx.us	Version V3.5.1.a18ea2ca

The Instruc	ction Guide explains how to complete thi	s form.	1 Total pages Schedule A(J)1: Sch: 3/14 Rpt: 6/58
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Morris, Britta	nye L. (The Honorable)		00084317
4 Date	5 Full name of contributor out-of-state PAC (IE	D#:)	7 Amount of Contribution (\$)
06/30/2023	Carter Law Firm		\$2,500.00
	6 Contributor address; City; State; Zip Code		
9 Contributor's F	bellaire, TX 77401 rrincipal Occupation	9 Contributor's Job Title	
6 Contributors P			
10 Contributor's e	mplover/law firm	<b>11</b> Law firm of contributor's s	pouse (if anv)
12 If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (IE	D#:)	Amount of Contribution (\$)
06/30/2023	Casey, Bob		\$2,000.00
	Contributor address; City; State; Zip Code		
	spring, TX 77386		
	Principal Occupation	Contributor's Job Title	
retired		retired	
	mployer/law firm	Law firm of contributor's s	pouse (if any)
none If contributor is	a child, law firm of parent(s) (if any)		
	a child, law lifth of parent(s) (if any)		
Date	Full name of contributor Out-of-state PAC (II	<b>7</b> <i>4</i> <b>.</b>	Amount of Contribution (\$)
06/30/2023	Full name of contributor U out-of-state PAC (IE Coulter, Keith	D#)	\$100.00
00/00/2020	Contributor address; City; State; Zip Code		
	houston, TX 77098		
Contributor's F	rincipal Occupation	Contributor's Job Title	•
attorney		attorney	
	mployer/law firm	Law firm of contributor's s	pouse (if any)
Cordray & So			
If contributor is	a child, law firm of parent(s) (if any)		
Forms provided	by Texas Ethics Commission www.etl	hics.state.tx.us	Version V3.5.1.a18ea2ca

The Instruction Guide explains how to comp	blete this form.	L Total pages Schedule A(J)1: Sch: 4/14 Rpt: 7/58
2 FILER NAME Morris, Brittanye L. (The Honorable)	3	<ul> <li>Filer ID (Ethics Commission Filers)</li> <li>00084317</li> </ul>
4 Date       5 Full name of contributor       □ out-of-st         06/30/2023       Farah, George         6 Contributor address; City; State; Zip Contributor		Amount of Contribution (\$) \$1,000.00
houston, TX 77006		
8 Contributor's Principal Occupation attorney	9 Contributor's Job Title attorney	
10 Contributor's employer/law firm Farah Law	11 Law firm of contributor's spor	use (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date       Full name of contributor       out-of-st         06/01/2023       Gibbs, Robin         Contributor address; City; State; Zip Contributor	tate PAC (ID#:) de	Amount of Contribution (\$) \$1,000.00
Houston, TX 77002 Contributor's Principal Occupation	Contributor's Job Title	
attorney	attorney	
Contributor's employer/law firm Gibbs & Bruns LLP	Law firm of contributor's spor	use (if any)
If contributor is a child, law firm of parent(s) (if any)		
06/16/2023 Gilbert, Sherra	tate PAC (ID#:) de	Amount of Contribution (\$) \$1,000.00
houston, TX 77007		
Contributor's Principal Occupation attorney	Contributor's Job Title attorney	
Contributor's employer/law firm	Law firm of contributor's spor	use (if anv)
Gilbert Law Firm		
If contributor is a child, law firm of parent(s) (if any)		
Forms provided by Texas Ethics Commission	www.ethics.state.tx.us	Version V3.5.1.a18ea2ca

The Instrue	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 5/14 Rpt: 8/58
2 FILER NAME Morris, Britta	2 FILER NAME Morris, Brittanye L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084317
4 Date 06/28/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#: Guss J.D., Stewart (Mr.)</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$2,500.00
	Hou, TX 77070		
	Principal Occupation	9 Contributor's Job Title	
attorney		attorney	
10 Contributor's e		<b>11</b> Law firm of contributor's sp	oouse (if any)
	uss Injury Lawyers		
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
06/28/2023	HOROWITZ, DANIEL		\$500.00
	Contributor address; City; State; Zip Code		
	houston, TX 77002		
Contributor's F	Principal Occupation	Contributor's Job Title	
attorney		attorney	
Contributor's e	employer/law firm	Law firm of contributor's sp	ouse (if any)
The Law Offi	ice of Daniel D. Horowitz, III, PC		
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/30/2023	Hall Law Firm		\$2,500.00
	Contributor address; City; State; Zip Code		
	·····		
	houston, TX 77006		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	ouse (if any)
If contributor is a child, law firm of parent(s) (if any)			
	by Taxas Ethics Commission	s state ty us	Version V/3 5 1 a18ea2ca

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 6/14 Rpt: 9/58
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Morris, Britta	nye L. (The Honorable)		00084317
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
06/16/2023	Jeffrey R Newport Law Offices		\$2,500.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77024		
8 Contributor's P	Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	mployer/law firm	<b>11</b> Law firm of contributor's sp	oouse (if any)
<b>12</b> If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/16/2023	Jim Adler & Associates		\$5,000.00
	Contributor address; City; State; Zip Code		
	houston, TX 77027		
Contributor's F	rincipal Occupation	Contributor's Job Title	
Contributor's e	mployer/law firm	Law firm of contributor's sp	ouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
	a child, law intri of parend(3) (it any)		
Data	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
Date 06/30/2023	Full name of contributor out-of-state PAC (ID#: Khawaja, Omar	)	\$2,500.00
00/00/2020	Contributor address; City; State; Zip Code		
	Contributor address, City, State, Zip Code		
	Houston, TX 77056		
Contributor's P	rincipal Occupation	Contributor's Job Title	
attorney		attorney	
Contributor's e	mployer/law firm	Law firm of contributor's sp	oouse (if any)
	ces of Omar Khawaja, PLLC		
If contributor is	a child, law firm of parent(s) (if any)		
Forms provided	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V3.5.1.a18ea2ca

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 7/14 Rpt: 10/58	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Morris, Britta	nye L. (The Honorable)		00084317	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
06/28/2023	Kretzer, Seth		\$250.00	
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77002			
	Principal Occupation	9 Contributor's Job Title		
Attorney	and a set from	attorney		
10 Contributor's e	of Seth Kretzer	<b>11</b> Law firm of contributor's sp	Jouse (II any)	
	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/30/2023	Law Offices of Nathaniel Mack	)	\$1,000.00	
	Contributor address; City; State; Zip Code			
	houston, TX 77098			
Contributor's F	Principal Occupation	Contributor's Job Title		
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)	
If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/30/2023	Lowenberg Law Firm		\$5,000.00	
	Contributor address; City; State; Zip Code			
	Houston, TX 77056			
Contributor's F	Principal Occupation	Contributor's Job Title		
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)	
If contributor is a child, law firm of parent(s) (if any)				
	by Tayas Ethics Commission www.ethic	e stato tv us	Version V2 5 1 a18ea2ca	

The Instruc	tion Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 8/14 Rpt: 11/58
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Morris, Britta	nye L. (The Honorable)		00084317
4 Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
06/30/2023	McCormick   Landry Munoz		\$250.00
	6 Contributor address; City; State; Zip Code		
	holloire TV 77401		
9 Contributor's F	bellaire, TX 77401 rincipal Occupation	9 Contributor's Job Title	
6 Contributors P			
10 Contributor's e	mplover/law firm	<b>11</b> Law firm of contributor's sp	pouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/30/2023	NTPI		\$300.00
	Contributor address; City; State; Zip Code		
	houston, TX 77057		
Contributor's P	rincipal Occupation	Contributor's Job Title	
Contributor's e	mployer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/30/2023	O'Hara, Patrick	)	\$500.00
	Contributor address; City; State; Zip Code		
	houston, TX 77014		
Contributor's P	rincipal Occupation	Contributor's Job Title	·
attorney		attorney	
	mployer/law firm	Law firm of contributor's sp	bouse (if any)
O'Hara Law I			
If contributor is	a child, law firm of parent(s) (if any)		
Forms provided	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V3.5.1.a18ea2ca

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 9/14 Rpt: 12/58
2 FILER NAME Morris, Britta	anye L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084317
4 Date 06/28/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID#: O'Rourke, Sean</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$250.00
	houston, TX 77002		
8 Contributor's I	Principal Occupation	9 Contributor's Job Title	
attorney		attorney	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
Simon & O'F	Rourke Law Firm		
12 If contributor i	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/30/2023	Presutti, Richard		\$1,000.00
	Contributor address; City; State; Zip Code		
	houston, TX 77060		
Contributor's I	Principal Occupation	Contributor's Job Title	
attorney		attorney	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
Law Office o	f Richard J. Presutti, P.C.		
If contributor i	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/30/2023	Pusch & Nguyen Accident Injury Lawyers		\$5,000.00
	Contributor address; City; State; Zip Code		
	houston, TX 77023		
Contributor's I	I Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contrib		Law firm of contributor's sp	oouse (if any)
lf contributor i	s a child, law firm of parent(s) (if any)		

The Instruc	tion Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 10/14 Rpt: 13/58		
2 FILER NAME Morris, Brittar	iye L. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00084317		
06/28/2023	<ul> <li>Full name of contributor out-of-state PAC (ID#:_ Roberts Markland LLP</li> <li>Contributor address; City; State; Zip Code</li> </ul>	)	7 Amount of Contribution (\$) \$2,500.00	
	houston, TX 77004			
8 Contributor's P	rincipal Occupation	9 Contributor's Job Title		
10 Contributor's er	nployer/law firm	<b>11</b> Law firm of contributor's sp	pouse (if any)	
12 If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/30/2023	Sheena, Danny Contributor address; City; State; Zip Code		\$2,500.00	
Contributor's D	Houston, TX 77027	Contributor's Job Title		
attorney	rincipal Occupation	attorney		
	nployer/law firm	Law firm of contributor's sp	oouse (if any)	
Sheena Law				
If contributor is	a child, law firm of parent(s) (if any)			
Date 06/30/2023	Full name of contributor       out-of-state PAC (ID#:_         Shelby, Timothy       out-of-state PAC (ID#:_         Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$1,500.00	
	houston, TX 77002			
	rincipal Occupation	Contributor's Job Title		
attorney	nployer/law firm	attorney Law firm of contributor's sp	pource (if any)	
	sanos & Mensing	Law IIIII of contributor's sp	Jouse (ii ally)	
	a child, law firm of parent(s) (if any)			
	y Texas Ethics Commission www.ethic:	s.state.tx.us	Version V3.5.1.a18ea2ca	

The Instruc	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 11/14 Rpt: 14/58				
2 FILER NAME Morris, Britta	nye L. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084317				
4 Date 06/16/2023	<ul> <li>5 Full name of contributorout-of-state PAC (ID#:Sorrels, Randall</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$1,000.00			
	Houston, TX 77007					
8 Contributor's F	Principal Occupation	9 Contributor's Job Title				
attorney		attorney				
10 Contributor's e	mployer/law firm	<b>11</b> Law firm of contributor's sp	oouse (if any)			
Sorrels Law						
12 If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)			
06/15/2023	Spagnoletti, Marcus		\$5,000.00			
	Contributor address; City; State; Zip Code					
	Houston, TX 77002					
Contributor's F	Principal Occupation	Contributor's Job Title				
attorney		attorney				
	mployer/law firm	Law firm of contributor's sp	oouse (if any)			
Spagnoletti L						
If contributor is	s a child, law firm of parent(s) (if any)					
Date 06/16/2023	Full name of contributor out-of-state PAC (ID#:_ The Poerschke Law Firm, Pc Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$500.00			
	houston, TX 77007					
Contributor's F	Principal Occupation	Contributor's Job Title				
Contributor's e	mployer/law firm	Law firm of contributor's spouse (if any)				
If contributor is	s a child, law firm of parent(s) (if any)					

The Instruc	tion Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 12/14 Rpt: 15/58	
2 FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)	
Morris, Britta	nye L. (The Honorable)	00084317	
	5 Full name of contributor Out-of-state PAC (ID#:	7 Amount of Contribution (\$)	
06/29/2023	Totz, Andrew		\$500.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77098		
Contributor's E	rincipal Occupation	9 Contributor's Job Title	
attorney		attorney	
10 Contributor's e	mplover/law firm	11 Law firm of contributor's sp	nouse (if any)
Totz Ellison			
	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/30/2023	Vinson & Elkins LLP		\$2,500.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77002		
Contributor's F	rincipal Occupation	Contributor's Job Title	
Contributor's e	mployer/law firm	Law firm of contributor's sp	bouse (if any)
If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/30/2023	Wilson, Timothy D.		\$500.00
	Contributor address; City; State; Zip Code		
	hempstead, TX 77445		
Contributor's F	rincipal Occupation	Contributor's Job Title	
investigator		investigator	
_	mployer/law firm	Law firm of contributor's sp	pouse (if any)
Tim Wilson II			
If contributor is	a child, law firm of parent(s) (if any)		
Forme provide-U	av Toyog Ethiog Commission		
Forms provided	by Texas Ethics Commission www.ethic	cs.state.tx.us	Version V3.5.1.a18ea2ca

The Instruction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 13/14 Rpt: 16/58	
2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)	
Morris, Brittanye L. (The Honorable)	00084317	
4 Date     5 Full name of contributor     out-of-state PAC (ID#:	)	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code		
Houston, TX 77057		
8 Contributor's Principal Occupation	9 Contributor's Job Title	
attorney	attorney	
10 Contributor's employer/law firm	11 Law firm of contributor's sp	ouse (if any)
The Zwernemann Law Firm		
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
06/28/2023 garcia, juan		\$1,000.00
Contributor address; City; State; Zip Code		
houston, TX 77074		
Contributor's Principal Occupation	Contributor's Job Title	
attorney	attorney	
Contributor's employer/law firm	Law firm of contributor's sp	ouse (if any)
Johnson Garcia LLP		
If contributor is a child, law firm of parent(s) (if any)		
Date Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
		\$1,000.00
Contributor address; City; State; Zip Code		
houston, TX 77036		
Contributor's Principal Occupation	Contributor's Job Title	
attorney	attorney	
Contributor's employer/law firm	Law firm of contributor's sp	ouse (if any)
The Hadi Law Firm		
If contributor is a child, law firm of parent(s) (if any)		
Forms provided by Texas Ethics Commission www.ethic	s.state.tx.us	Version V3.5.1.a18ea2ca

The Instru	ction Guide explains how to co	1	Total pages Schedule A(J)1 Sch: 14/14 Rpt: 17/58	:		
2 FILER NAME	-	3	Filer ID (Ethics Commissio	on Filers)		
Morris, Britta	anye L. (The Honorable)		00084317			
4 Date	5 Full name of contributor out-o	7	Amount of Contribution (\$)			
06/28/2023	husain, nomaan					\$5,000.00
		Code		1		
	· · · · · · · · · · · · · · · · · · ·					
	houston, TX 77057					
9 Contributor's	Principal Occupation		9 Contributor's Job Title			
	Phillipal Occupation					
attorney			attorney		<i></i>	
	employer/law firm		<b>11</b> Law firm of contributor's sp	ous	se (if any)	
	+ Associates					
12 If contributor	is a child, law firm of parent(s) (if any)					
Date	Full name of contributor out-o	of-state PAC (ID#:_	)		Amount of Contribution (\$)	
06/30/2023	joseph, leena					\$1,000.00
	Contributor address; City; State; Zip			1		
	houston, TX 77023					
Contributor's	I Principal Occupation		Contributor's Job Title	I		
attorney			attorney			
	employer/law firm		Law firm of contributor's sp	אוחר	e (if any)	
	fice of Domingo Garcia		Law infinition contributor 3 Sp	Jou		
	is a child, law firm of parent(s) (if any)					
	s a child, law little of parent(s) (il ally)					

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

т	he Instru	ction Guide explains how to complete this f	1	1 Total pages Schedule A2: Sch: 1/1 Rpt: 18/58			
	ne motru	etion outlie explains now to complete this h					
2 FI	ILER NAME		3	Filer ID (Ethics Commission Filers)			
М	lorris, Britta	anye L. (The Honorable)			00084317		
4 T	OTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$			
5 Da	ate	6 Full name of contributor out-of-state PAC (ID#:	)	8	Amount of <b>9</b> In-kind contribution		
06	6/27/2023	Guss J.D., Stewart (Mr.)		contribution (\$) description \$558.94 I			
		7 Contributor address; City; State; Zip Code		4550.941 I			
					1		
		Hou, TX 77070			Check if travel outside of Texas. Complete Schedule T.		
<b>10</b> Pr	rincipal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JL	IDICIAL) (See instructions)		
<b>12</b> Co	ontributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title (FOR JUDICIAL) (See instructions)				
at	ttorney		attorney				
<b>14</b> Co	ontributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)				
St	tewart J. G	Suss, Injury Accident Lawyers					
<b>16</b> If	contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	· · ·	3 Filer ID (Ethics Commission Filers)		
1	Sch: 1/39 Rpt: 19/58	Morris, Brittanye L. (The Honorable)	00084317		
4	Date 05/01/2023	5 Payee name BKG Hotel			
6	Amount (\$) \$614.90	7 Payee address; City; State; Zip Code Bd Mohamed VI marrakech 40000 Morocco			
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense Conference		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	05/01/2023	British Airlines			
	Amount (\$) \$4,310.65	Payee address; City; State; Zip Code waterside po box 365			
		harmondsworth ub7 ogb United Kingdom			
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense P <b>TENCE</b>		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	04/13/2023	Burger Bodega			
	Amount (\$) \$37.52	Payee address;City;State;Zip Code4520 Washington Ave			
		Houston, TX 77007			
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain:	Office O Polling E Printing I Salaries/	verhea Expense Expense Wages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 2/39 Rpt: 20/58		Morris, Brittanye L. (The Honorable)					00084317
4	Date 06/28/2023		Payee name Central Market					
6	Amount (\$) \$226.70		Payee address; City; Stat 3815 westheimer rd houston, TX 77027	e; Zip C	ode			
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so Event Expense	chedule)	(b)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	ught			Office held
	Date		Payee name					
	06/29/2023		Central Market					
	Amount (\$) \$636.51		Payee address; City; Stat 3815 westheimer rd	e; Zip C	ode			
			houston, TX 77027					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so Food/Beverage Expense	chedule)	(b)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense <b>expense</b>
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	ught			Office held
	Date		Payee name					
	04/25/2023		District Court Benevolence Fund					
	Amount (\$) \$50.00		Payee address; City; State 201 caroline	e; Zip C	ode			
			houston, TX 77002					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so Fees	hedule)	(b)		, тх,	ide of Texas. Complete Schedule T. , officeholder living expense nd
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	ught			Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense       Committee     Legal Services       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)			
1	Total pages Schedule F1:	2 FILER NAME 3	Filer ID (Ethics Commission Filers)			
	Sch: 3/39 Rpt: 21/58	Morris, Brittanye L. (The Honorable)	00084317			
4	Date 01/17/2023	Payee name Door Dash				
6	Amount (\$) \$9.99	Payee address; City; State; Zip Code 901 Market St #600 San Francisco, TX 94103				
8	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	02/17/2023	Door Dash				
	Amount (\$) \$9.99	Payee address;City;State;Zip Code901 Market St#600San Francisco, TX 94103				
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	03/17/2023	Door Dash				
	Amount (\$) \$9.99	Payee address; City; State; Zip Code 901 Market St #600 San Francisco, TX 94103				
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Rep Office Ove Polling Ex Printing E Salaries/V	ayme erhea pense xpens xpens Vages	nt/Reimbursement d/Rental Expense e se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 4/39 Rpt: 22/58		Morris, Brittanye L. (The Honorable)					00084317
4	Date	5	Payee name					
	04/17/2023		Door Dash					
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	ode			
	\$9.99		901 Market St					
			#600					
			San Francisco, TX 94103					
8	PURPOSE	(a)	Category (See Categories listed at the top of this so	chedule)	(b)	Description		
	OF EXPENDITURE		Fees					de of Texas. Complete Schedule T.
							, TX,	officeholder living expense
						delivery fee		
9	Complete ONLY if direct		Candidate/Officeholder name	Office sou	laht			Office held
5	expenditure to benefit C/OF		andidate/Onicenoider name	Onice sou	igni			Onice neid
	Date		Payee name					
	05/17/2023		Door Dash					
	Amount (\$)		Payee address; City; State	e; Zip Co	ode			
	\$9.99		901 Market St					
			#600					
			San Francisco, TX 94103					
	PURPOSE	(a)	Category (See Categories listed at the top of this so	chedule)	(b)	Description		
	OF EXPENDITURE		Fees	,				de of Texas. Complete Schedule T.
							, TX,	officeholder living expense
						delivery fee		
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	l			Office held
	expenditure to benefit C/Oł			Office 300	igin			
_	Date	_	Payee name					
	06/20/2023		Door Dash					
	Amount (\$)		Payee address; City; State	e; Zip Co	ode			
	\$9.99		901 Market St	o;p oc				
			#600					
			San Francisco, TX 94103					
	PURPOSE	(2)			(h)	Description		
	OF		Category (See Categories listed at the top of this so Fees	chedule)		Description Check if travel	outsi	de of Texas. Complete Schedule T.
	EXPENDITURE							officeholder living expense
						delivery fee		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ıght			Office held
⊢								

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimburse Fees Office Overhead/Rental Exp Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Lai	ense Transportation Equipment & Related Expense Travel in District Travel Out of District bor OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)		
	Sch: 5/39 Rpt: 23/58	Morris, Brittanye L. (The Honorable)	00084317		
4	Date 05/08/2023	Payee name Etsy.com			
6	Amount (\$) \$2.92	Payee address; City; State; Zip Code 117 adams st brooklyn, NY 11201			
8	PURPOSE OF EXPENDITURE		on if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense pages for Iftar event		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	02/17/2023	Fiverr			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$56.23	401 Broadway STE 1600 New York, NY 10013-3020			
	PURPOSE OF EXPENDITURE		if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	02/21/2023	Fiverr			
	Amount (\$) \$247.43	Payee address; City; State; Zip Code 401 Broadway STE 1600 New York, NY 10013-3020			
	PURPOSE OF EXPENDITURE		on if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense e advertising		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-	Fees         Office Overhead/Rental Expense           Food/Beverage Expense         Polling Expense           Gift/Awards/Memorials Expense         Printing Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2 [	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 6/39 Rpt: 24/58		Morris, Brittanye L. (The Honorable)	00084317							
4	Date 02/21/2023		Payee name       Fiverr								
6	Amount (\$)       7       Payee address;       City;       State;       Zip Code         \$281.16       401 Broadway       STE 1600       STE 1600       New York, NY 10013-3020										
8	8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Advertising Expense       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T.       Image: Check if travel outside of Texas. Complete Schedule T.         Image: Check if Austin, TX, officeholder living expense advertising       Image: Check if Austin, TX, officeholder living expense advertising										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	Office sou	iht		Office held				
	Date	1	Payee name								
	02/21/2023		Fiverr								
	Amount (\$) \$281.16		Payee address; City; State; 401 Broadway STE 1600 New York, NY 10013-3020	Zip Coo	le						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Advertising Expense	edule)			ide of Texas. Complete Schedule T. , officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	Office sou	ıht		Office held				
	Date		Payee name								
	02/22/2023		Fiverr								
	Amount (\$) \$36.82		Payee address; City; State; 401 Broadway STE 1600 New York, NY 10013-3020	Zip Coo	le 						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Advertising Expense	∋dule)			ide of Texas. Complete Schedule T. , officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	Office sou	iht		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-	Fees         Office Overhead/Rental Expense           Food/Beverage Expense         Polling Expense           Gift/Awards/Memorials Expense         Printing Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 7/39 Rpt: 25/58		Morris, Brittanye L. (The Honorable)				00084317				
4	Date	5	Payee name								
	02/23/2023		Fiverr								
6	Amount (\$)	7	Payee address; City; State; Zip Code								
	\$110.78		401 Broadway								
			STE 1600								
			New York, NY 10013-3020								
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	odulo)	(b) Description						
	OF		Advertising Expense			outsi	ide of Texas. Complete Schedule T.				
	EXPENDITURE		<b>C</b> .			n, TX	, officeholder living expense				
					advertising						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	jht		Office held				
	Date	Γ	Payee name								
	03/21/2023		Fiverr								
Amount (\$) Payee address; City; State; Zip Code											
	\$52.75		401 Broadway								
			STE 1600								
			New York, NY 10013-3020								
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description						
	OF EXPENDITURE		Advertising Expense				ide of Texas. Complete Schedule T.				
	EXPENDITORE		Check if Austin, TX, officeholder living expense								
					advertising						
	Complete ONIL V if direct	Ľ	Constitute (Office helder name		. L.1		Office held				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	jni		Office held				
	Date		Payee name								
	03/31/2023		Fiverr								
	Amount (\$)		Payee address; City; State;	Zip Co	le						
	\$10.55		401 Broadway								
			STE 1600								
			New York, NY 10013-3020								
	PURPOSE		Category (See Categories listed at the top of this sche		(b) Description						
	OF		Advertising Expense	edule)		outsi	ide of Texas. Complete Schedule T.				
	EXPENDITURE Check if Austin, TX, officeholder living expense										
	advertising										
	Complete ONLY if direct		Candidate/Officeholder name O	office soug	Jht		Office held				
	expenditure to benefit C/OI	1									

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 8/39 Rpt: 26/58	Morris, Brittanye L. (The Honorable)	00084317							
4	Date 04/05/2023	5 Payee name Fiverr								
6	Amount (\$)       7       Payee address;       City;       State;       Zip Code         \$189.27       401 Broadway       STE 1600       STE 1600       New York, NY 10013-3020									
<ul> <li>8 PURPOSE OF EXPENDITURE</li> <li>(a) Category (See Categories listed at the top of this schedule) Advertising Expense</li> <li>(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense advertising</li> </ul>										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	04/11/2023	Fiverr								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$562.32	401 Broadway								
		STE 1600 New York, NY 10013-3020								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	04/17/2023	Fiverr								
	Amount (\$) \$281.16	Payee address; City; State; Zip Code 401 Broadway STE 1600 New York, NY 10013-3020								
	PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Advertising Expense       (b) Description         Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense advertising									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimburseme       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense								
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 9/39 Rpt: 27/58	Morris, Brittanye L. (The Honorable)	00084317							
4	Date 05/09/2023	5 Payee name Fiverr								
6	Amount (\$) \$224.93 \$224.93 T Payee address; City; State; Zip Code 401 Broadway STE 1600 New York, NY 10013-3020									
8	<ul> <li>8 PURPOSE OF EXPENDITURE</li> <li>(a) Category (See Categories listed at the top of this schedule) Advertising Expense</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense advertising</li> </ul> </li> </ul>									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	05/10/2023	Fiverr								
	Amount (\$) \$506.09	Payee address; City; State; Zip Code 401 Broadway STE 1600 New York, NY 10013-3020								
	PURPOSE OF EXPENDITURE		ivel outside of Texas. Complete Schedule T. istin, TX, officeholder living expense							
	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	05/24/2023	Fiverr								
	Amount (\$) \$281.16	Payee address; City; State; Zip Code 401 Broadway STE 1600 New York, NY 10013-3020								
	PURPOSE OF EXPENDITURE       (a) Category       (See Categories listed at the top of this schedule)       (b) Description         Advertising Expense       Check if travel outside of Texas. Complete Schedule T.         Check if Austin, TX, officeholder living expense       advertising									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held							

		EXPENDITURE CATEGORIES FOR BOX 8(a)	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event ExpenseLoan Repayment/ReimbursementFeesOffice Overhead/Rental ExpenseFood/Beverage ExpensePolling ExpenseGift/Awards/Memorials ExpensePrinting Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)									
1	Total pages Schedule F1:		<b>3</b> Filer ID (Ethics Commission Filers)									
	Sch: 10/39 Rpt: 28/58	Morris, Brittanye L. (The Honorable)	00084317									
4	Date 06/05/2023	Payee name     Fiverr										
6	Amount (\$)	Payee address; City; State; Zip Code										
	\$13.59	401 Broadway										
		STE 1600										
		New York, NY 10013-3020										
_												
8	<ul> <li>8 PURPOSE OF EXPENDITURE</li> <li>(a) Category (See Categories listed at the top of this schedule) Advertising Expense</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense advertising</li> </ul> </li> </ul>											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held									
	Date	Payee name										
	06/09/2023	Fiverr										
Amount (\$) Payee address; City; State; Zip Code												
	\$562.32	401 Broadway										
		STE 1600										
		New York, NY 10013-3020										
	PURPOSE OF EXPENDITURE		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held									
	Date	Payee name										
	01/10/2023	Go Daddy.com										
	Amount (\$)	Payee address; City; State; Zip Code										
	\$204.42	2155 E. GoDaddy Way										
		tempe, AZ 85284										
	PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Fees       (b) Description         (b) Description       Check if travel outside of Texas. Complete Schedule T.         (c) Check if Austin, TX, officeholder living expense web site fee											
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held									

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 11/39 Rpt: 29/58		Morris, Brittanye L. (The Honorable)					00084317			
4	Date	5	Payee name								
	01/11/2023		Go Daddy.com								
6	Amount (\$)	7		te; Zip Co	ode						
	\$30.16		2155 e godaddy way								
			tempe, AZ 85284								
_		<u> </u>	-		<u>(</u>						
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description	outei	de of Texas. Complete Schedule T.			
	EXPENDITURE		Fees					officeholder living expense			
						web site fee					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held			
	Date		Payee name								
	05/24/2023		Houston Bar Foundation								
	Amount (\$)		Payee address; City; Stat	te; Zip Co	ode						
	\$260.00		1111 Bagby St								
			Houston, TX 77002								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this s Event Expense	chedule)	(b)			de of Texas. Complete Schedule T. officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ıght			Office held			
	Date		Payee name								
	03/31/2023		Houston Lawyers Association								
	Amount (\$)		Payee address; City; Stat	te; Zip Co	ode						
	\$125.00		po box 300009								
			houston, TX 77230		_						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description					
	EXPENDITURE		Fees				, тх,	de of Texas. Complete Schedule T. officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ight			Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				head/Rental Expense ense pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME		-	3	Filer ID (Ethics Commission Filers)			
	Sch: 12/39 Rpt: 30/58		Morris, Brittanye L. (The Honorable)				00084317			
4	Date	5	Payee name							
	06/15/2023		Houston Lawyers Association							
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de					
	\$83.00		po box 300009							
			houston, TX 77230							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	odulo)	(b) Description					
	OF		Event Expense	euule)	-	outsi	de of Texas. Complete Schedule T.			
	EXPENDITURE				Check if Austin	, TX	officeholder living expense			
					gala					
9	Complete ONLY if direct		Candidate/Officeholder name O	office soug	jht		Office held			
	expenditure to benefit C/OI	Η								
	Date		Payee name							
	02/21/2023		Houston Society for Change							
Amount (\$) Payee address; City; State; Zip Code										
	\$500.00		1507 California St							
			#2							
			Houston, TX 77006							
	DUDDOCE				(h)					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description	outsi	de of Texas. Complete Schedule T.			
	EXPENDITURE		Event Expense				officeholder living expense			
					Juneteenth e	ver	nt			
	Complete ONLY if direct	(	Candidate/Officeholder name O	office sou	jht		Office held			
	expenditure to benefit C/OI	Н								
	Date		Payee name							
	05/01/2023		International Association of Women Jud	dges						
	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$1,560.00		2000 m street nw							
	. ,		suite 750c							
			Washington dc, DC 20036							
	DUDDOOF	(-)			(L)					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description	outei	de of Texas. Complete Schedule T.			
	EXPENDITURE		Event Expense				officeholder living expense			
					judicial confe					
	Complete ONLY if direct	- (	Candidate/Officeholder name O	)ffice sou	jht		Office held			
	expenditure to benefit C/OI	Н		·						
⊢										

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Event Exper Fees Food/Bevera Gift/Awards/ Legal Servio	age Expense Memorials Exper	nse	Loan Repa Office Ove Polling Ex Printing Ex Salaries/W	iymei rhead bense pens ages	nt/Reimbursement d/Rental Expense e e /Contract Labor		Transportatior Travel in Distr Travel Out of	n Equ ict Distr	aising Expense uipment & Related Expense ict ategory not listed above)
1	Total pages Schedule F1:	2								2	Filer ID		(Ethics Commission Filers)
1		<b> </b> <sup>2</sup>								l 3			
	Sch: 13/39 Rpt: 31/58		Morris, Brittanye L. (The Honorable) 00084317										
4	Date	5	5 Payee name										
	01/27/2023		Johnston Tobey Baruch										
	Arreaust (ft)	<u> </u>											
6	Amount (\$)	ľ											
	\$2,679.12		12377 Merit Dr										
			STE 880										
			Dallas, TX	75251									
8	PURPOSE	(a)	Category (S		s listed at the top	of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Legal Serv	ices								•	ete Schedule T.
										ι, TΧ,	, officeholder liv	ing e	expense
									legal fee				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Off	ïceholder I	name	C	Office sou	ght			Office	hel	d
	Date		Payee name	;									
	06/07/2023		Macy's										
		-	-		<b>4</b>	Ctata	7:0 00	al a					
	Amount (\$)		Payee addre		ty;	State;	; Zip Co	ae					
	\$79.18		303 memo	rial city									
			houston, T	X 77024									
	PURPOSE OF EXPENDITURE	(a)	Category (s Event Expe		s listed at the top	of this sch	edule)	(b)		ı, ТХ,	, officeholder liv	•	ete Schedule T. expense
_	Complete ONLY if direct		Candidate/Of	icebolder	name		Office sou	thr			Office	hol	d
	expenditure to benefit C/Oł		Januluale/On		lame		Jince Sou	JIII			Onice	nen	u
	Date		Payee name	;									
	01/17/2023		Maxum Dig	jital Media	a								
	Amount (\$)	$\vdash$	Payee addre	ess: Ci	ty;	State <sup>.</sup>	; Zip Co	de					
	\$3,050.00		6650 s taxa		- 2 - 2	_ 1010,	, _,, 00						
	ψ3,030.00		0000 3 1010	13 0									
			houston, T	X 77083									
	PURPOSE	(a)	Category (s	Cotocori-	listed at the tra	of this ask	odule)	(þ)	Description				
	OF	<b>[</b> <sup>(1)</sup>					euule)	()		outsi	ide of Texas. Co	ompl	ete Schedule T.
	EXPENDITURE       Advertising Expense       Check if travel outside of Texas. Complete Schedule T.         Check if Advertising Expense       Check if Austin, TX, officeholder living expense												
									web site desi			5-	
										5			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder i	name	C	Office sou	ght			Office	nel	a
	compendatione to beliefit C/Of	• •											

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense       Committee     Legal Services     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)							
1	Total pages Schedule F1:	2 FILER NAME 3	Filer ID (Ethics Commission Filers)							
	Sch: 14/39 Rpt: 32/58	Morris, Brittanye L. (The Honorable) 00084317								
4	Date 03/28/2023	Payee name Maxum Digital Media								
6	Amount (\$) \$250.00									
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule)       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T.       Image: Check if travel outside of Texas. Complete Schedule T.         Image: Check if Austin, TX, officeholder living expense       Web site development										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	01/13/2023	Museum of Fine Arts, Houston								
⊢	Amount (\$)									
	\$500.00	Payee address; City; State; Zip Code 1001 Bissonnet Houston, TX 77005								
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense ship							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	05/15/2023	Mövenpick Marrakech								
	Amount (\$) \$772.00	Payee address; City; State; Zip Code Bd Mohamed VI								
		Marrakech 40000 Morocco								
	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Travel Out of District</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Hotel during conference</li> </ul>								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)							
	Sch: 15/39 Rpt: 33/58	Morris, Brittanye L. (The Honorable)	00084317							
4	Date	5 Payee name								
	05/15/2023	Mövenpick Marrakech								
6	Amount (\$) \$189.00	Payee address; City; State; Zip Code Bd Mohamed VI								
		Marrakech 40000 Morocco								
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense hotel stay during conference										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	04/27/2023	National Association of Women Judges								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$170.00 PO Box 3363									
		Warrenton, VA 20188								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense ee							
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	05/15/2023	Nothing Bundt Cake								
	Amount (\$)     Payee address;     City;     State;     Zip Code       \$39.00     14555 Memorial Dr       Unit 200       Houston, TX 77079									
	PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense staff appreciation dessert									
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME	-		-	3	Filer ID	(Ethics Commission Filers)		
-	Sch: 16/39 Rpt: 34/58	[	Morris, Brittanye L. (The Honoral	hle)			ľ	00084317			
4	Date	-						0000-011			
4	05/17/2023	5	5 Payee name Nothing Bundt Cake								
6	Amount (\$)	7	Payee address; City;	State; Zip	Cod	е					
	\$25.50		14555 Memorial Dr								
			Unit 200								
			Houston, TX 77079								
8	PURPOSE	(a)	Category (See Categories listed at the top o	f this schedule)	(	b) Description					
	OF EXPENDITURE		Food/Beverage Expense					ide of Texas. Com			
								, officeholder living	) expense		
						staff birthday					
_				011				011			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office s	sougi	nt		Office he	eiα		
	Date		Payee name								
	05/09/2023		Office Depot								
	Amount (\$)		Payee address; City;	State; Zip	Cod	е					
	\$16.56		415 s fry rd								
			katy, TX 77450								
	PURPOSE	(a)	Category (See Categories listed at the top o	f this schedule)	(	b) Description					
	OF EXPENDITURE		Printing Expense				outs	ide of Texas. Com	plete Schedule T.		
	EXPENDITORE						Check if Austin, TX, officeholder living expense				
						printing					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office s	sougl	nt		Office he	eld		
	Date		Payee name								
	05/18/2023		Office Depot								
	Amount (\$)		Payee address; City;	State; Zip	Cod	е					
	\$23.00		415 s fry rd								
			katy, TX 77450								
	PURPOSE	(a)	Category (See Categories listed at the top o	f this schedule)	(	b) Description					
	OF EXPENDITURE		Printing Expense	,		Check if travel	outs	ide of Texas. Com	plete Schedule T.		
	EXPENDITORE						I, TX	, officeholder living	) expense		
		printing									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office s	sougl	nt		Office he	eld		

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 17/39 Rpt: 35/58		Morris, Brittanye L. (The Honorable)				00084317				
4	Date	5	Payee name								
	04/17/2023		Omni Dallas Convention								
6	Amount (\$)	7	Payee address; City; State; Zip Code								
	\$184.25		555 S Lamar St								
			Dallas, TX 75202								
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description						
	OF EXPENDITURE		Travel Out of District	,			ide of Texas. Complete Schedule T.				
						, TX	, officeholder living expense				
					hotel						
_											
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	int		Office held				
	Date		Payee name								
	03/01/2023		Raising Cane's								
Amount (\$) Payee address; City; State; Zip Code											
	\$37.00		2015 Shepherd Dr	Ζιρ Ου							
	φ37.00		2013 Shepherd Di								
			Houston, TX 77007								
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description						
	OF EXPENDITURE		Food/Beverage Expense				ide of Texas. Complete Schedule T.				
	_/						Check if Austin, TX, officeholder living expense aff lunch				
					stan lunch						
	Complete ONIL V if direct		Candidate/Officeholder name O	ffice cour	. ht		Office held				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF			office sou	JUL		Once heid				
_	Data		<b>D</b>								
	Date 01/13/2023		Payee name Sam's Club								
	Amount (\$)			Zin Co	40						
	\$44.99		Payee address; City; State; 20424 Katy Freeway	Zip Co	le						
	\$ <del>44</del> .99		20424 Kaly Fleeway								
			Katy, TX 77449								
	DUDDOOF		-								
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	(b) Description	outs	ide of Texas. Complete Schedule T.				
	EXPENDITURE		Food/Beverage Expense				, officeholder living expense				
					juror snacks						
	Complete ONLY if direct		Candidate/Officeholder name O	office sou	jht		Office held				
	expenditure to benefit C/OF	Η									

EXPENDITURE CATEGORIES FOR BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
	Sch: 18/39 Rpt: 36/58	Morris, Brittanye L. (The Honorable)	00084317
4	Date 01/17/2023	Payee name Sam's Club	
6	Amount (\$) \$43.88	Payee address; City; State; Zip Code 20424 Katy Freeway Katy, TX 77449	
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	01/25/2023	Sam's Club	
	Amount (\$)	xmount (\$) Payee address; City; State; Zip Code	
	\$110.00	20424 Katy Freeway Katy, TX 77449	
	PURPOSE OF EXPENDITURE		uutside of Texas. Complete Schedule T. TX, officeholder living expense Ce
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	03/06/2023	Sam's Club	
	Amount (\$) \$192.14	Payee address;     City;     State;     Zip Code       192.14     20424 Katy Freeway	
	Katy, TX 77449		
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense       Committee     Legal Services       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)							
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)							
	Sch: 19/39 Rpt: 37/58	Morris, Brittanye L. (The Honorable)	00084317							
4	Date 06/05/2023	Payee name Sam's Club								
6	Amount (\$) \$261.68	<sup>7</sup> Payee address; City; State; Zip Code 20424 Katy Freeway Katy, TX 77449								
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule)       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T.       Image: Check if Austin, TX, officeholder living expense         Image: Check if Austin, TX, officeholder living expense       Image: Check if Austin, TX, officeholder living expense										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	06/30/2023	Sam's Club								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$116.00	20424 Katy Freeway Katy, TX 77449								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. . TX, officeholder living expense nk expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	01/30/2023	Shopify								
	Amount (\$) \$30.91	Payee address; City; State; Zip Code 150 Elgin								
		Ottawa Ontario Canada								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

		EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2		Filer ID (Ethics Commission Filers)							
	Sch: 20/39 Rpt: 38/58		Morris, Brittanye L. (The Honorable)				00084317				
4	Date	5	Payee name								
	02/17/2023		Shopify								
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de						
	\$1.69		150 Elgin								
			Ottawa Ontario Canada								
8	PURPOSE	(a)	Category (See Categories listed at the top of this scho	edule)	(b) Description						
	OF EXPENDITURE		Fees	eulie)		outsi	de of Texas. Complete Schedule T.				
	EXPENDITORE						officeholder living expense				
					transaction fe	ee					
9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH											
	Date		Payee name								
	02/21/2023		Shopify								
	Amount (\$)			Zip Co	de						
	\$7.42		150 Elgin	2.p 00							
	ψ1.+ <b>z</b>										
			Ottawa Ontario Canada								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Fees	edule)		ı, ТХ,	de of Texas. Complete Schedule T. officeholder living expense				
					lansaction	ee.					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held				
	Date		Payee name								
	02/21/2023		Shopify								
	Amount (\$)		Payee address; City; State;	Zip Co	de						
	\$8.43		150 Elgin	·							
			, C								
			Ottawa Ontario Canada								
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description						
	OF EXPENDITURE		Fees				de of Texas. Complete Schedule T.				
	-				transaction fe		officeholder living expense				
					u ansaction te	e e					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	JIIL		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee	Event Expense Fees Food/Beverage Expen Gift/Awards/Memorials Legal Services The Instruction G	Expense	Office Over Polling Exp Printing Exp Salaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2 FILER NAME 3 Fi						Filer ID (Ethics Commission Filers)		
	Sch: 21/39 Rpt: 39/58		s, Brittanye L. (The Ho	onorable)				00084317		
4	Date 02/21/2023	5 Paye Shop								
		-	-		7' 0					
6 Amount (\$) 7 Payee address; City; State; Zip Code \$8.43 150 Elgin Ottawa Ontario Canada										
8	PURPOSE	a) Cator	10.01/ /2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			b) Description				
Ū	OF	Fees	JORY (See Categories listed at t	he top of this sch	iedule)	Check if travel	n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ate/Officeholder name	C	Office soug	ht		Office held		
	Date	Paye	e name							
	02/22/2023	Shop	bify							
	Amount (\$)	Paye	e address; City;	State;	; Zip Coc	e				
	\$1.10	150 I Ottav	Elgin va Ontario Canada							
	PURPOSE OF EXPENDITURE	( <b>a)</b> Cateç Fees		he top of this sch	iedule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candid	ate/Officeholder name	C	Office soug	ht		Office held		
	Date	Paye	e name							
	02/23/2023	Shop	bify							
	Amount (\$)	Paye	e address; City;	State;	; Zip Coc	e				
	\$3.32	150 I	Elgin							
		Ottav	va Ontario Canada							
	PURPOSE OF EXPENDITURE	( <b>a)</b> Cateç Fees		he top of this sch	edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ate/Officeholder name	C	Office soug	ht		Office held		

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:		Filer ID (Ethics Commission Filers)
-	Sch: 22/39 Rpt: 40/58	Morris, Brittanye L. (The Honorable)	00084317
4	Date 02/28/2023	5 Payee name Shopify	
6	Amount (\$) \$30.91	7 Payee address; City; State; Zip Code 150 Elgin Ottawa Ontario Canada	
8	PURPOSE OF EXPENDITURE		ide of Texas. Complete Schedule T. , officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	03/21/2023	Shopify	
	Amount (\$) \$1.58	Payee address; City; State; Zip Code 150 Elgin Ottawa Ontario Canada	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outs	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	03/30/2023	Shopify	
	Amount (\$) \$30.91	Payee address; City; State; Zip Code 150 Elgin	
		Ottawa Ontario Canada	
	PURPOSE OF EXPENDITURE		ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2			•	3	Filer ID (Ethics Commission Filers)			
-	Sch: 23/39 Rpt: 41/58	2	Morris, Brittanye L. (The Honorable)				00084317			
4	Date	5	Payee name							
	03/31/2023		Shopify							
6	Amount (\$)	7	Payee address; City; State	; Zip Co	de					
	\$0.32		150 Elgin							
			Ottawa Ontario Canada							
8	PURPOSE	(a)			(b) Description					
ľ	OF	(a)	Category (See Categories listed at the top of this sch Fees	iedule)		outsi	de of Texas. Complete Schedule T.			
	EXPENDITURE		1663				officeholder living expense			
					transaction fe	e				
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH										
	Date		Payee name							
	04/05/2023		Shopify							
	Amount (\$)		Payee address; City; State	; Zip Co	de					
	\$5.68		150 Elgin	, 20 00						
	φ5.00									
			Ottawa Ontario Canada							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Fees	iedule)		, TX	de of Texas. Complete Schedule T. officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	Office sou	ght		Office held			
	Date		Payee name							
	04/11/2023		Shopify							
	Amount (\$)		Payee address; City; State	; Zip Co	de					
	\$16.87		150 Elgin	, 20 00						
	\$10.01									
			Ottawa Ontario Canada							
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description					
	OF EXPENDITURE		Fees				de of Texas. Complete Schedule T.			
							officeholder living expense			
					transaction fe	ee				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	· · · · ·	Filer ID (Ethics Commission Filers)							
-	Sch: 24/39 Rpt: 42/58	-	Morris, Brittanye L. (The Honorable)				00084317				
4	Date	5	Payee name								
	04/17/2023		Shopify								
6	Amount (\$)	7	Payee address; City; State;	Idress; City; State; Zip Code							
	\$8.43		150 Elgin								
			Ottawa Ontario Canada								
8	PURPOSE	(a)			(b) Description						
ľ	OF	(a)	Category (See Categories listed at the top of this sch Fees	edule)		outsi	de of Texas. Complete Schedule T.				
	EXPENDITURE		1663				officeholder living expense				
					transaction fe	e					
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held				
	Date		Payee name								
	05/01/2023		Shopify								
	Amount (\$)			Zip Co	de						
	\$41.57		150 Elgin	Ζιρ Ου							
	φ41.07										
			Ottawa Ontario Canada								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Fees	edule)		, TX	de of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Dffice sou	ght		Office held				
	Date		Payee name								
	05/01/2023		Shopify								
-	Amount (\$)		Payee address; City; State;	Zip Co	de						
	\$46.80		150 Elgin	2.0 00							
	<b>\$</b> -10.00										
			Ottawa Ontario Canada								
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description						
	OF EXPENDITURE		Fees				de of Texas. Complete Schedule T.				
transaction fee											
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reinbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gitt/Awards/Memorials Expense     Printing Expense       Legal Services     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)							
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)							
	Sch: 25/39 Rpt: 43/58	Morris, Brittanye L. (The Honorable)	00084317							
4	Date 05/01/2023	Payee name Shopify								
6	Amount (\$)	Payee address; City; State; Zip Code								
0	\$18.45 Ottawa Ontario Canada									
8	PURPOSE	a) Cotogony (2. a. the state of the set of t								
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Fees       (b) Description         Image: Check if Austin, TX, officeholder living expense transaction fee       Check if Austin, TX, officeholder living expense										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	05/09/2023	Shopify								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$6.75	150 Elgin Ottawa Ontario Canada								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense PC							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	05/09/2023	Shopify								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$0.41	150 Elgin								
		Ottawa Ontario Canada								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense <del>C</del>							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide expla	Of Po Pri Sa	ffice Overl olling Expe inting Exp alaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME			-	3	Filer ID (Ethics Commission Filers)			
-	Sch: 26/39 Rpt: 44/58	-	Morris, Brittanye L. (The Honorable	)				00084317			
4	Date	5	Payee name								
	05/10/2023		Shopify								
6	Amount (\$)	7	Payee address; City; St	State; Zip Code							
	\$15.18		150 Elgin								
			Ottawa Ontario Canada								
8	PURPOSE	(a)			. (	b) Description					
ľ	OF	(4)	Category (See Categories listed at the top of this Fees	s schedule	e)		outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE					Check if Austir	, TX	, officeholder living expense			
						transaction fe	ee				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Offic	ce soug	ht		Office held			
	Date		Payee name								
	05/15/2023		Shopify								
_	Amount (\$)		Payee address; City; St	tate; Z	in Cod	e					
	\$23.16		150 Elgin		p 000	•					
	\$20.10										
			Ottawa Ontario Canada								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Fees	s schedule	e) (		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Offic	ce soug	ht		Office held			
	Date		Payee name								
	05/15/2023		Shopify								
-	Amount (\$)		Payee address; City; St	tate; Z	'in Cod	e					
	\$5.67		150 Elgin	, _		-					
	+0101										
			Ottawa Ontario Canada								
	PURPOSE	(a)	Category (See Categories listed at the top of this	s schedule	e) (	b) Description					
	OF EXPENDITURE		Fees					ide of Texas. Complete Schedule T.			
								, officeholder living expense			
						transaction fe	ee				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Offic	ce soug	ht		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fe Fo Gi umittee Le	vent Expense ees ood/Beverage Expense ft/Awards/Memorials Exp gal Services <b>he Instruction Guide</b>		Office Over Polling Exp Printing Exp Salaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAME 3 Fil						Filer ID (Ethics Commission Filers)			
	Sch: 27/39 Rpt: 45/58		iye L. (The Hono	rable)				00084317			
4	Date 05/24/2023	Payee name Shopify									
6 Amount (\$)       7 Payee address; City; State; Zip Code         \$8.43       150 Elgin         Ottawa Ontario Canada											
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Fees       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense transaction fee							-				
9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH								Office held			
	Date	Payee name									
	05/30/2023	Shopify									
	Amount (\$) \$41.57	Payee address 150 Elgin	; City;	State;	Zip Cod	е					
		Ottawa Ontar			T						
	PURPOSE OF EXPENDITURE	Category <sub>(See</sub> ) Fees	Categories listed at the to	p of this sche	edule)		ı, TX,	de of Texas. Complete Schedule T. officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Office	holder name	0	Office soug	ht		Office held			
	Date	Payee name									
	06/05/2023	Shopify									
	Amount (\$) \$0.41	Payee address 150 Elgin	; City;	State;	Zip Cod	e					
		Ottawa Ontar	io Canada								
	PURPOSE OF EXPENDITURE	Category <sub>(See</sub> ) Fees	Categories listed at the to	p of this sche	edule)		ı, ТХ,	de of Texas. Complete Schedule T. officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Office	holder name	0	Office soug	ht		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens Imittee Legal Services The Instruction Guide ex		Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2		•		•	3	Filer ID (Ethics Commission Filers)		
-	Sch: 28/39 Rpt: 46/58		Morris, Brittanye L. (The Honora	ble)			ľ	00084317		
4	Date	5	Payee name							
	06/09/2023		Shopify							
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	le				
	\$16.87 150 Elgin									
			Ottawa Ontario Canada							
8	PURPOSE	(a)	Category (See Categories listed at the top of	of this sch	edule)	(b) Description				
	OF EXPENDITURE		Fees	1 113 301	icuaic)		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITORE							, officeholder living expense		
						transaction fe	ee			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	lht		Office held		
	Date		Payee name							
	06/28/2023		Shopify							
	Amount (\$)		Payee address; City;	State:	; Zip Coo	le				
	\$41.57		150 Elgin	,	, 1					
	•									
			Ottawa Ontario Canada							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of Fees	of this sch	nedule)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	C	Dffice soug	ht		Office held		
	Date		Payee name							
	04/16/2023		Sultan, Rabeea (The Honorable)	)						
	Amount (\$)		Payee address; City;	State:	; Zip Coo	le				
	\$1,617.60		201 Caroline							
			Houston, TX 77002							
	PURPOSE OF	(a)	Category (See Categories listed at the top of	of this sch	nedule)	(b) Description				
	EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T. , officeholder living expense		
						Iftar CLE	I, IA,	, unceriolder living expense		
-	Complete ONLY if direct	Ļ	andidate/Officeholder name		Office soug	iht		Office held		
	expenditure to benefit C/OI		מהמוטמוביסחוטבו וומוווצ	C	Suice soul	pric				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Glft/Awards/Memorials Expen	ise i	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)		
	Sch: 29/39 Rpt: 47/58		Morris, Brittanye L. (The Honora	able)				00084317	. , ,		
4	Date	5	Payee name	,							
	05/09/2023		Taxis - Booking.com								
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	le					
	\$13.62		28 Liberty Street								
			29th floor								
			new york, NY 10005								
			-								
8	PURPOSE OF	(a)	Category (See Categories listed at the top		dule)	(b) Description					
	EXPENDITURE		Transportation Equipment & Re	lated				ide of Texas. Com , officeholder living			
			Expense			transportatio					
						lanoportatio	i u				
_				0#	fine eeu	-la.4		Office he			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	UII	fice sou	m		Office he	910		
	Date		Payee name								
	03/06/2023		Terrys Florist								
	Amount (\$)		Payee address; City;	State;	Zip Co	le					
	\$283.48		s shady shores								
	+200110										
			lake dallas, TX 75065								
	PURPOSE	(a)	Category (See Categories listed at the top	of this sched	dule)	(b) Description					
	OF EXPENDITURE		Gift/Awards/Memorials Expense	9				ide of Texas. Com			
	-				Check if Austin, TX, officeholder living expense bereavement flowers						
						bereavemen		wers			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Off	fice sou	Iht		Office he	eld		
	Date		Payee name								
	06/30/2023		Texas Center for the Judicary								
	Amount (\$)		Payee address; City;	State;	Zip Co	le					
	\$325.00		201 Caroline St								
			houston, TX 77002								
	PURPOSE	(a)	Category (See Categories listed at the top	of this sched	dule)	(b) Description					
	OF	<u> </u>	Fees	2 20000	- /		outs	ide of Texas. Com	plete Schedule T.		
EXPENDITURE Check if Austin, TX, officeholder living expense									expense		
						CLE					
	Complete ONLY if direct		Candidate/Officeholder name	Off	fice sou	lht		Office he	eld		
	expenditure to benefit C/OI	Н									

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Cabadula E1	2					2		(Ethios Commission Filors)		
1	Total pages Schedule F1:	²					3	Filer ID	(Ethics Commission Filers)		
	Sch: 30/39 Rpt: 48/58		Morris, Brittanye L. (T	he Honorable)				00084317			
4	Date	5	Payee name								
	05/02/2023		Texas Ethics Commis	sion							
	03/02/2023			51011							
6	Amount (\$)	5) 7 Payee address; City; State; Zip Code									
	\$500.00 201 E 14th Street										
			Suite 10								
			Austin, TX 78701								
8	PURPOSE	(a)	Category (See Categories I		- duta)	(b) Description					
-	OF		Fees	sted at the top of this sche	edule)		outsi	ide of Texas. Com	plete Schedule T.		
	EXPENDITURE		rees					, officeholder living			
						pfs report late			expense		
						pis report late	e ie	e			
9	Complete ONLY if direct	. (	Candidate/Officeholder na	ime C	Office soug	ht		Office he	eld		
	expenditure to benefit C/OI	Н									
		_									
	Date		Payee name								
	04/10/2023		Texas Gulf Coast ALF	:							
_	Amount (\$)	┝	Payee address; City	· State:	Zip Coo						
	.,			, State,							
	\$500.00		2506 Sutherland St.								
			houston, TX 77023								
	PURPOSE OF	(a)	Category (See Categories I	sted at the top of this sch	edule)	(b) Description					
	EXPENDITURE		Event Expense					ide of Texas. Com			
	-				Check if Austin, TX, officeholder living expense						
						gala					
	Complete ONLY if direct		Candidate/Officeholder na	ime C	Office souc	ht		Office he	eld		
	expenditure to benefit C/OI										
		_									
	Date		Payee name								
	03/10/2023		The Caucus								
	Amount (\$)		Payee address; City	· Stato:	Zip Coo	10					
				, State,	Zip Cot						
	\$40.00		401 branard st								
			2nd floor								
			houston, TX 77006								
	PURPOSE	(a)	Category (See Categories I	sted at the top of this sch	edule)	<b>(b)</b> Description					
			Fees			Check if travel	outs	ide of Texas. Com	plete Schedule T.		
	EXPENDITURE					Check if Austin	, ТХ	, officeholder living	expense		
						membership	fee	<u>!</u>			
_	Complete ONIL V if allocat	Ļ	andidate Office			b+		<u></u>			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder na	une C	Office soug	III		Office he	lu l		
	Superioration to Demonit C/OI	•									

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Cor Credit Card Payment			Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.						Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2		- onpitality				3	Filer ID	(Ethics Commission Filers)	
1	Sch: 31/39 Rpt: 49/58	2	Morris, Brittanye L. (The Honorable) 00084317								
4	Date	5	Payee name								
	06/01/2023		The Grove								
6	Amount (\$)	7	7 Payee address; City; State; Zip Code								
	\$286.91		1611 Lamar St								
			Houston, TX 77010								
8	PURPOSE	(a)				(h) D	accription				
ľ	OF	(a)	Category (See Categories listed at the to	p of this sch	edule)		Check if travel o	nutsio	de of Texas. Com	nlete Schedule T	
	EXPENDITURE		Food/Beverage Expense			-	4		officeholder living		
						SI	Laff lunch		Ū		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Dffice souç	Iht			Office he	eld	
	Date		Payee name								
	03/07/2023		United states postal service								
			-	Ctoto		10					
	Amount (\$)		Payee address; City;	State;	; Zip Co	ie					
	\$210.00 2909 Rogerdale rd										
			Houston, TX 77042								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the to Fees	op of this sch	edule)		_	TX,	de of Texas. Com officeholder living year rental	•	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Dffice sou	lht			Office he	eld	
	Date		Payee name								
	06/28/2023		Whole Foods								
_				Stata:	Zin Co	10					
	Amount (\$)		Payee address; City;	State,	; Zip Co	ie					
	\$143.00		2955 Kirby Dr								
			Houston, TX 77098								
	PURPOSE	(a)	Category (See Categories listed at the to	p of this sch	edule)	( <b>b)</b> D	escription				
	OF EXPENDITURE		Food/Beverage Expense				4		de of Texas. Com		
						Ļ	_		officeholder living	expense	
						fL	undraiser foo	0/D	ITINKS		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	Iht			Office he	eld	
$\vdash$											

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explair	Office ( Polling Printing Salarie	Overhe Expen J Exper s/Wage	nse es/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 32/39 Rpt: 50/58		Morris, Brittanye L. (The Honorable)					00084317	
4	Date 05/08/2023								
6	Amount (\$)     7 Payee address; City; State; Zip Code     117 Adams St     Brooklyn, NY 11201								
8	8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Event Expense       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense coloring pages for iftar event						expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office s	ought	t		Office he	eld
	Date		Payee name						
	06/01/2023		paypal						
	Amount (\$)     Payee address;     City;     State;     Zip Code       \$29.39     2211 North First Street								
	PURPOSE OF EXPENDITURE	(a)	San Jose, CA 95131 Category (See Categories listed at the top of this s Fees	chedule)	(b		, TX,	de of Texas. Com officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office s	ought	t		Office he	eld
	Date		Payee name						
	06/13/2023		paypal						
	Amount (\$) \$144.99		Payee address; City; Sta 2211 North First Street	te; Zip (	Code				
			San Jose, CA 95131						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this s Fees	chedule)	(b)		, TX,	de of Texas. Com officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office s	oughi	t		Office he	eld

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense umittee Legal Services The Instruction Guide exp	lains	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 33/39 Rpt: 51/58		Morris, Brittanye L. (The Honorab	le)				00084317
4	Date 06/14/2023	5 Payee name paypal						
6	Amount (\$) 7 Payee address; City; State; Zip Code \$29.39 2211 North First Street							
	\$20.00		San Jose, CA 95131					
8	<ul> <li>8 PURPOSE OF EXPENDITURE</li> <li>(a) Category (See Categories listed at the top of this schedule) Fees</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense processing fee</li> </ul>							
9	9     Complete ONLY if direct expenditure to benefit C/OH     Candidate/Officeholder name     Office sought     Office held							Office held
	Date							
	06/21/2023		Payee name paypal					
	Amount (\$)			State <sup>.</sup>	Zip Co	he		
	\$29.39 2211 North First Street							
			San Jose, CA 95131					
			Category (See Categories listed at the top of I Fees	his sch	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Dffice sou	ght		Office held
	Date		Payee name					
	06/22/2023		paypal					
	Amount (\$) \$14.94		Payee address; City; 2211 North First Street	State;	; Zip Co	de		
			San Jose, CA 95131					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of I Fees	his sch	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explains	Office Ov Polling Ex Printing E Salaries/V	erhead/l xpense xpense Vages/C	Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2			•		3	Filer ID (	Ethics Commission Filers)	
-	Sch: 34/39 Rpt: 52/58	-	Morris, Brittanye L. (The Honorable)				0	00084317		
4	Date 06/23/2023	5	Payee name paypal							
6	Amount (\$)	7	Payee address; City; State	; Zip Co	ode					
	\$9.16		2211 North First Street	· •						
			San Jose, CA 95131							
8	PURPOSE	(2)			(h) -	Decerintien				
°	OF	(a)	Category (See Categories listed at the top of this sc Fees	hedule)		Description Check if travel of	outsio	de of Texas. Comple	te Schedule T.	
	EXPENDITURE		rees					officeholder living ex		
					L L	processing fe	e			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held	I	
	Date		Payee name							
	06/26/2023		paypal							
	Amount (\$)		Payee address; City; State	; Zip Co	ode					
	\$14.94		2211 North First Street	· •						
			San Jose, CA 95131							
PURPOSE OF EXPENDITURE			Category (See Categories listed at the top of this sc Fees	hedule)			, TX,	de of Texas. Comple officeholder living ex		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	l Ight			Office held	l	
	Date		Payee name							
	06/26/2023		paypal							
	Amount (\$)			; Zip Co	nde					
	\$7.72		2211 North First Street	, <u>Lip</u> ot						
	<i>••••</i>									
			San Jose, CA 95131		-					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sc	hedule)	<b>(b)</b> [	Description	_			
	EXPENDITURE		Fees		∣∣			de of Texas. Comple		
						Drocessing fe		officeholder living ex	kpense	
						indeessing le	0			
		Ļ	Sondidata/Officabaldar a ser	Office act	a ht				1	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	iynt			Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME		-	3	Filer ID (Ethics Commission Filers)		
-	Sch: 35/39 Rpt: 53/58	Morris, Brittanye L. (The Honorable)							
4	Date	5	5 Payee name						
	06/26/2023		paypal						
6	Amount (\$)	ount (\$) 7 Payee address; City; State; Zip Code							
	\$72.74		2211 North First Street						
			San Jose, CA 95131						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	odulo)	(b) Description				
-	OF		Fees	equie)		outsi	de of Texas. Complete Schedule T.		
	EXPENDITURE				Check if Austin	, TX	officeholder living expense		
					processing fe	e			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Office sou	ght		Office held		
	Date		Payee name						
	06/26/2023		paypal						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$29.39		2211 North First Street						
			San Jose, CA 95131						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Fees	edule)		, TX	de of Texas. Complete Schedule T. officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name C	Office sou	ght		Office held		
	Date		Payee name						
	06/27/2023		paypal						
	Amount (\$)			Zip Co	de				
	\$144.99		2211 North First Street	, <u>Lip</u> 00					
	φ <u>1</u> -1-1.00								
			San Jose, CA 95131						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description				
	EXPENDITURE		Fees				de of Texas. Complete Schedule T. officeholder living expense		
					processing fe				
					processing le				
L		Ľ	Condidate/Officeholder name		abt		Office held		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	yrit		Office held		
	-								

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	nmittee	Legal Services	Office Overhead/Rental Expense everage Expense Polling Expense ards/Memorials Expense Printing Expense					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	FILER NAME					3	Filer ID	(Ethics Commission Filers)		
	Sch: 36/39 Rpt: 54/58		anye L. (The Hor	norable)				00084317	X Z		
4	Date 06/27/2023	5 Payee name paypal									
6	Amount (\$)       7       Payee address;       City;       State;       Zip Code         \$29.39       \$211 North First Street         San Jose, CA 95131										
8	B       PURPOSE OF EXPENDITURE       (a) Category       (See Categories listed at the top of this schedule)       (b) Description         Image: Check if Check if Check if Check if Austin, TX, officeholder living expense processing fee       Image: Check if Austin, TX, officeholder living expense										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Offic	ceholder name	C	Office soug	ht		Office h	eld		
	Date	Payee name									
	06/27/2023	paypal									
	Amount (\$)     Payee address;     City;     State;     Zip Code       \$72.74     2211 North First Street										
		San Jose, C	A 95131								
	PURPOSE OF EXPENDITURE	Category <sub>(Se</sub> Fees	e Categories listed at the	e top of this sch	edule)		n, TX,	de of Texas. Com officeholder living	plete Schedule T. g expense		
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Offic	ceholder name	C	Dffice soug	ht		Office h	eld		
	Date	Payee name									
	06/28/2023	paypal									
	Amount (\$) \$72.74	Payee addres		State;	Zip Coo	le					
		San Jose, C									
	PURPOSE OF EXPENDITURE	Category <sub>(Se</sub> Fees	e Categories listed at the	e top of this scho	edule)		ι, TX,	de of Texas. Com officeholder living	plete Schedule T. g expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Offic	ceholder name	C	Office sou	ht		Office h	eld		

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	, _ I Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Exp Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME		-	3	Filer ID (Ethics Commission Filers)	
-	Sch: 37/39 Rpt: 55/58							
4	Date	5	Payee name					
	06/28/2023		paypal					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de			
	\$7.72		2211 North First Street					
			San Jose, CA 95131					
8	PURPOSE	(2)			(b) Description			
ľ	OF	(a)	Category (See Categories listed at the top of this sche Fees	edule)		outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE		1663				officeholder living expense	
					processing fe	e		
9	9     Complete ONLY if direct     Candidate/Officeholder name     Office sought     Office held       expenditure to benefit C/OH     Condidate/Officeholder name     Office sought     Office held							
	Date		Payee name					
	06/29/2023		paypal					
	Amount (\$)			Zip Co	de			
	\$14.94		2211 North First Street	Zip 00				
	ψ14.94							
			San Jose, CA 95131					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Fees	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name C	Office sou	ght		Office held	
	Date		Payee name					
	06/30/2023		paypal					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$29.39		2211 North First Street	210 00				
	φ23.33							
			San Jose, CA 95131					
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE		Fees				de of Texas. Complete Schedule T.	
							officeholder living expense	
					processing fe	e		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held	
-								

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 38/39 Rpt: 56/58		Morris, Brittanye L. (The Honorable)				00084317
4	Date	5	Payee name				
	06/30/2023		paypal				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de		
	\$7.72		2211 North First Street				
			San Jose, CA 95131				
8	PURPOSE	(a)			(b) Description		
ľ	OF	(4)	Category (See Categories listed at the top of this sche Fees	edule)		outsi	de of Texas. Complete Schedule T.
	EXPENDITURE						officeholder living expense
					processing fe	e	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name C	Office sou	ght		Office held
	Date		Payee name				
	06/30/2023		paypal				
_	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$29.39		2211 North First Street	p 00			
	Ψ20.00						
			San Jose, CA 95131				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Fees	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name C	Office sou	ght		Office held
	Date		Payee name				
	06/30/2023		paypal				
-	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$2.99		2211 North First Street	p 00			
	Ψ2.00						
			San Jose, CA 95131				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	EXPENDITURE		Fees				de of Texas. Complete Schedule T.
					processing fe		officeholder living expense
					processing le		
		Ļ					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	gnt		Office held

	POLITICAL EX	PENDITURES FROM PERSONAL	FUNDS SCHEDULE G			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead Food/Beverage Expense Polling Expense y - Gift/Awards/Memorials Expense Printing Expense	nt/Reinbursement Solicitation/Fundraising Expense d/Rental Expense Transportation Equipment & Related Expense e Travel in District se Travel Out of District s/Contract Labor OTHER (enter a category not listed above)			
1	Total pages Schedule G: Sch: 1/1 Rpt: 58/58	2 FILER NAME Morris, Brittanye L. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00084317			
4	Date 06/30/2023	5 Payee name Morris, Brittanye (Judge)	i			
6	Amount (\$) \$1,419.00 7 Payee address; City; State; Zip Code PO Box 42546					
L	Reimbursement from           political contributions           intended	HOUSTON, TX 77242				
8	PURPOSE OF EXPENDITURE	Event Expense	Description Check if travel outside of Texas. Complete Schedule T.			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			