GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

Th	The GPAC Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 00055728					 Total pages file 74 	
3	COMMITTEE NAME					OFFICE U	SE ONLY
	Harris County Den	nocratic Lawyers' Association Inc.				Date Received ELECTRONICAL 07/17/2023	
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; CI	TY;	STATE;	ZIP CODE		
	ADDRESS	3401 Allen Pkwy				Date Hand-delivered or D	Date Postmarked
	Change of Address	Suite 100					
		Houston, TX 77019				Receipt #	Amount
						Date Processed	·
						Date Imaged	
5	CAMPAIGN TREASURER	MS / MRS / MR FIRST				MI	
	NAME	Mr. Dwayne					
		NICKNAME LAST				SUFFIX	
		Simpson					
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE	#; CITY;	STAT	E; ZIP CODE
	TREASURER STREET ADDRESS	1305 Prairie St. Ste. 300					
	(Residence or Business)	Houston, TX 77002					
7	CAMPAIGN	STREET OR PO BOX;		APT / SUIT	E #; CITY;	STA	TE; ZIP CODE
	TREASURER MAILING ADDRESS	PO Box 8189					
	Change of Address	Houston, TX 77288					
8	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (832) 916-0702	EX	ENSION			
9	REPORT TYPE	January 15 3	Oth c	ay before election		Dissolution (Attach	PAC-DR)
			th da	y before election		10th day after camp termination	paign treasurer
		X July 15	uno	f		termination	
10	PERIOD COVERED	Month Day Year 01/01/2023 T	HR	M DUGH	onth Day 06/30/2023	Year 3	
11	ELECTION	ELECTION DATE		ELEC	TION TYPE		
			Prim Gene		noff Decial	Other	
		· · · · · ·					
		GO	то	PAGE 2			
Foi	orms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.a18ea2ca						

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Harris County Democra	tic Lawyers' Associatio	n Inc.	00055728	3
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(Describe by date and location of election and nature of issue.)			
		B. Opposed		
	3. Officeholders Assisted			
	(Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA		\$	15,080.96
EXPENDITURE TOTALS		POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	21,975.64
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	10,794.56
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	•			
		I swear, or affirm, under penalty of pe true and correct and includes all inforr under Title 15, Election Code.		
			ne Simpson	
		Signature of Car	npaign Treas	urer
AFFIX NOTARY	STAMP / SEAL ABOVE			
		, tł	nis the	day
of	, 20, to certify w	which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of off	icer administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V3.5.1.a18ea2ca

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

3 of 74

17 COMMITTEE NAME 18 Filer ID (E		(Ethics Commission Filers)	
	unty Democratic Lawyers' Association Inc.	00055728	•
	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1. X	1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 15,080.96
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	IR	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	ATION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.	ANIZATION	\$
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.	8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION		\$
9.	9. SCHEDULE E: LOANS		\$
10. X	10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$ 21,975.64
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	ONS	\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$
			·

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/48 Rpt: 4/74	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Harris Count	y Democratic Lawyers' Association Inc.			00055728	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	04/18/2023	Adkison-Brown, Denise				\$75.00
		6 Contributor address; City; State; Zip Code				
		-				
		Houston, TX 77004				
8		pation / Job title (See Instructions)	9 Employer (See Instructions)	5)		
	Attorney					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	04/04/2023	Adkison-Brown, Denise				\$35.00
		Contributor address; City; State; Zip Code				
	<u> </u>	Houston, TX 77004		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Attorney					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/18/2023	Aiyer, Jay				\$35.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77002				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u> •)		
	Attorney			<i>י</i> י		
╞		Full name of contributor out-of-state PAC (ID#:	、 、	1	Amount of Contribution (\$)	
	Date 06/21/2023	Full name of contributor out-of-state PAC (ID#: Allen, Stacy)			\$75.00
	00/21/2020	-				Φι 3.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77002				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	1 5)		
	Attorney	· · · ·	• • •			
╞	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/28/2023	Arney, Lance			· · ·	\$35.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77002				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Attorney					
		· · · ·				

SCHEDULE	A1
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Filers)
Filers)
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\$35.00
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\$35.00
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SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/48 Rpt: 6/74	
2	FILER NAME			3	Filer ID (Ethics Commission	i Filers)
	Harris Count	y Democratic Lawyers' Association Inc.			00055728	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/06/2023	Arnold, George				\$75.00
	l	6 Contributor address; City; State; Zip Code				
	I					
	I					
		Houston, TX 77056				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Attorney					
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/18/2023	Arnold, George				\$35.00
	I	Contributor address; City; State; Zip Code				
	I					
	I					
		Houston, TX 77056				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney					
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	02/14/2023	Avery, Jeffrey				\$75.00
	I	Contributor address; City; State; Zip Code				
	I					
	I					
		Houston, TX 77019				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/13/2023	Ayala, Miryea				\$75.00
	1	Contributor address; City; State; Zip Code				
	I					
	I					
		Houston, TX 77002				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney					
Γ	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/13/2023	Ayala, Miryea				\$50.00
	I	Contributor address; City; State; Zip Code				
	I					
	I					
		Houston, TX 77002				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney					
1						

SCHEDULE	A1
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The Instru	ction Guide explains how to complete t	this form.	1 Total pages Schedule A1: Sch: 4/48 Rpt: 7/74	
2 FILER NAME			3 Filer ID (Ethics Commission Filers))
Harris Coun	y Democratic Lawyers' Association Inc.		00055728	
4 Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7 Amount of Contribution (\$)	
03/07/2023	Bailey, Nancy		\$35	6.00
	6 Contributor address; City; State; Zip Code		1	
	Houston, TX 77019			
	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
Retired				
Date	Full name of contributor 🛛 out-of-state PAC	C (ID#:)	Amount of Contribution (\$)	
01/18/2023	Bailey, Nancy		\$35	6.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77019			
Bringinal occu	pation / Job title (See Instructions)	Employer (See Instructions	2)	
Retired			5)	
			Amount of Contribution (ft)	
Date 02/28/2023	Full name of contributor Dut-of-state PAC Dailey, Nancy	C (ID#:)	Amount of Contribution (\$) \$35	00
02/20/2023				.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77019			
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	s)	
Retired				
Date	Full name of contributor out-of-state PAC	C (ID#:)	Amount of Contribution (\$)	
04/25/2023	Bailey, Nancy		\$35	6.00
	Contributor address; City; State; Zip Code		1	
	Houston, TX 77019			
	pation / Job title (See Instructions)	Employer (See Instructions	5)	
Retired				
Date	Full name of contributor 🔲 out-of-state PAC	C (ID#:)	Amount of Contribution (\$)	
04/18/2023	Baldonado, Gener		\$75	6.00
	Contributor address; City; State; Zip Code			
	Houston TX 77002			
Drincipal accord	Houston, TX 77002	Employer (Coo Instruction		
Attorney	pation / Job title (See Instructions)	Employer (See Instruction	5)	
Лаотнеу				

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	1	Total pages Schedule A1: Sch: 5/48 Rpt: 8/74		
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Harris Coun [,]	ty Democratic Lawyers' Association Inc.		ĺ	00055728	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	01/31/2023	Barchas, Sarah				\$75.00
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77019				
8			9 Employer (See Instructions)	,)		
	Non-Attorney	۶				
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	01/04/2023	Barrett, Kenneth				\$35.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77254				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Attorney					
Γ	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	06/27/2023	Barron, Patrice				\$75.00
		Contributor address; City; State; Zip Code				
L		Houston, TX 77266				
		pation / Job title (See Instructions)	Employer (See Instructions)	;)		
L	Attorney					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/21/2023	Bauer, Joshua				\$35.00
		Contributor address; City; State; Zip Code				
L		Houston, TX 77027				
		ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
L	Attorney			_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	_
	05/31/2023	Behrman, John				\$35.00
		Contributor address; City; State; Zip Code				
L		Houston, TX 77006		Ĺ		
		ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
L	Non-Attorney	/				

SCHEDULE	A1
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	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 6/48 Rpt: 9/74	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Harris Count	y Democratic Lawyers' Association Inc.			00055728	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	05/16/2023	Benitez, Purvi				\$75.00
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77073	,			
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Attorney					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/13/2023	Bennett, Robert				\$75.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77030				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> :)		
	Attorney			"		
	Date	Full name of contributor out-of-state PAC (ID#:		<u> </u>	Amount of Contribution (\$)	
	05/09/2023	Full name of contributor out-of-state PAC (ID#: Bertini, Christopher)		Amount of Contribution (\$)	\$35.00
	00/00/2020	Contributor address; City; State; Zip Code				400.00
		Contributor address, City, State, Zip Code				
		Bellaire, TX 77401				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/31/2023	Birnberg, Gerald				\$35.00
		Contributor address; City; State; Zip Code				
		Houston TV 77024				
⊢	Dringingloggy	Houston, TX 77024 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Attorney)		
╞			<u> </u>	_	American for a tribution (A)	
	Date 05/09/2023	Full name of contributor Dut-of-state PAC (ID#: Bradford, Clarence)		Amount of Contribution (\$)	\$35.00
	05/09/2025					φ35.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77002				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	L;)		
	Advisor					
⊢						

The Instru	iction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 7/48 Rpt: 10/74	
2 FILER NAME			3 Filer ID (Ethics Commission Filers))
Harris Cour	ty Democratic Lawyers' Association Inc.		00055728	
4 Date	5 Full name of contributor out-of-state PAC (ID#)	7 Amount of Contribution (\$)	
06/13/2023	Brain, Allan		\$75	5.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77027			
	upation / Job title (See Instructions)	9 Employer (See Instructions)	
Attorney		<u> </u>		
Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)	
02/14/2023			\$35	5.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77027			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions)	
Attorney)	
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)	
06/27/2023	Full name of contributor out-of-state PAC (ID#: Braun, Stephen	:)	Amount of Contribution (\$) \$50	 ۱۵۵
00/21/2020				1.00
	Continuation address, City, State, Zip Code			
	Houston, TX 77008			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions)	
Attorney				
Date	Full name of contributor out-of-state PAC (ID#	:)	Amount of Contribution (\$)	
02/14/2023	Brockway, Emma		\$25	5.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77019			
•	upation / Job title (See Instructions)	Employer (See Instructions)	
Attorney				
Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)	
06/27/2023			\$250).00
	Contributor address; City; State; Zip Code			
	Houston, TX 77004			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions)	
Attorney	,		/	
-				

٦	Γhe Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 8/48 Rpt: 11/74	
2 F	ILER NAME			3 Filer ID (Ethics Commission F	ilers)
F	Harris Count	ty Democratic Lawyers' Association Inc.		00055728	
	Date 01/24/2023	5 Full name of contributor out-of-state PAC (ID#: Brown, Denise)	7 Amount of Contribution (\$)	\$35.00
		6 Contributor address; City; State; Zip Code			
		Houston, TX 77004			
	Principal occu Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions	IS)	
C	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
0	06/13/2023	Brown, Porscha			\$75.00
		Contributor address; City; State; Zip Code			
		Houston, TX 77002	Employer (See Instructions		
	Attorney	pation / Job title (See Instructions)	Employer (See Instructions	.s)	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
0	02/28/2023	Brown, Saundra			\$70.00
		Contributor address; City; State; Zip Code Bellaire, TX 77401			
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions	.s)	
C	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
0	05/09/2023	Brownfeld, Gail			\$75.00
		Contributor address; City; State; Zip Code			
		Houston, TX 77002			
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions	ıs)	
C	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
C	06/06/2023	Burchett, Lynda			\$75.00
		Contributor address; City; State; Zip Code			
		Houston, TX 77070			
		pation / Job title (See Instructions)	Employer (See Instructions	IS)	
A	Attorney				

	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 9/48 Rpt: 12/74
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
		ty Democratic Lawyers' Association Inc.		00055728
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	03/07/2023	Burchett, Lynda		\$35.00
		6 Contributor address; City; State; Zip Code		
		Houston, TX 77070		
8		pation / Job title (See Instructions)	9 Employer (See Instructions)	3)
	Attorney			
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	01/18/2023	Burchett, Lynda		\$35.00
		Contributor address; City; State; Zip Code		
		Houston, TX 77070		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	3)
	Attorney			
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	02/28/2023	Burchett, Lynda		\$35.00
		Contributor address; City; State; Zip Code		
		Houston, TX 77070		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)
	Attorney			
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	04/25/2023	Burchett, Lynda		\$35.00
		Contributor address; City; State; Zip Code		
		Houston, TX 77070		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	3)
	Attorney			
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	01/10/2023	Burgess, Marilyn		\$35.00
		Contributor address; City; State; Zip Code		
		Houston, TX 77002		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	s)
	Attorney			
		I		

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 10/48 Rpt: 13/74	
2 FILER NAME			3 Filer ID (Ethics Commission Fi	ilers)
Harris Coun	ty Democratic Lawyers' Association Inc.		00055728	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
06/27/2023	Caballero, Deborah			\$75.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77266			
Attorney	ipation / Job title (See Instructions)	9 Employer (See Instructions	;)	
		<u> </u>	American of Quarterile sting (d)	
Date 06/13/2023	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	\$75.00
00/13/2023				\$75.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77001			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions) ;)	
Attorney				
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
02/22/2023	Calabrese, Tracy			\$35.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77001			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Attorney			7	
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
06/27/2023	Calnan, Cornelius	/		\$75.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77005			
	pation / Job title (See Instructions)	Employer (See Instructions	;)	
Attorney				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/04/2023	Calnan, Cornelius			\$35.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77005			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)	
Attorney	,		/	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 11/48 Rpt: 14/74
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Harris Count	ty Democratic Lawyers' Association Inc.		00055728
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
02/14/2023	Calnan, Cornelius		\$35.0
	6 Contributor address; City; State; Zip Code		
	Lauston TV 7700E		
• Drincinal occu	Houston, TX 77005 upation / Job title (See Instructions)	9 Employer (See Instructions	
Attorney)
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/02/2023	Full name of contributor out-of-state PAC (ID#: Calnan, Cornelius		\$35.0 \$
00,02,2020			
	כטוונווטענטו מעעובסס, כונץ, סומוכ, בוף כסמכ		
	Houston, TX 77005		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)
Attorney			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/31/2023	Carter, Eric		\$35.0
	Contributor address; City; State; Zip Code		
	Dollairo TV 77401		
Principal occu	Bellaire, TX 77401 upation / Job title (See Instructions)	Employer (See Instructions	
Attorney			7
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)
06/27/2023	Chan, Jessica	/	\$75.0
	Contributor address; City; State; Zip Code		
	Houston, TX 77027		
	upation / Job title (See Instructions)	Employer (See Instructions	;)
Attorney			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/27/2023	Chauvin, Suzanne		\$75.0
	Contributor address; City; State; Zip Code		
	Houston, TX 77001		
Drincinal occu	upation / Job title (See Instructions)	Employer (See Instructions	
Attorney			<i>י)</i>
/			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 12/48 Rpt: 15/74
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ty Democratic Lawyers' Association Inc.		00055728
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
06/27/2023	Cofield, Brandon		\$25.00
	6 Contributor address; City; State; Zip Code		
	Usuates TV 77004		
• Drincinal occu	Houston, TX 77004 pation / Job title (See Instructions)	9 Employer (See Instructions	<u></u>
Attorney)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/24/2023	Cohen, Murry		\$70.00
	Contributor address; City; State; Zip Code		
	Houston TX 77020		
Principal occu	Houston, TX 77030 pation / Job title (See Instructions)	Employer (See Instructions	<u></u>
Attorney			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
02/28/2023	Cohen, Roberta)	\$70.00
	Contributor address; City; State; Zip Code		
Driveringel as a	Houston, TX 77019	Frankriger (Open handriget)	<u></u>
Attorney	pation / Job title (See Instructions)	Employer (See Instructions	5)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
04/04/2023	Colon, Edgar		\$35.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77007		
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions] 3)
Attorney			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/21/2023	Condara, Christie		\$75.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77077		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Attorney			<i>'</i>

The Instru	ction Guide explains how to complete this t	form.	1 Total pages Schedule A1: Sch: 13/48 Rpt: 16/74	
2 FILER NAME			3 Filer ID (Ethics Commission F	-ilers)
	ty Democratic Lawyers' Association Inc.		00055728	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
06/21/2023	Cornelio, Natalia			\$75.00
	6 Contributor address; City; State; Zip Code			
C. D. in simplification	Houston, TX 77002		<u>`</u>	
	ipation / Job title (See Instructions)	9 Employer (See Instructions	;)	
Attorney			T	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	to:= 00
05/31/2023				\$35.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77002			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Attorney			')	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
05/31/2023		/		\$35.00
00,01,1011	Contributor address; City; State; Zip Code			Ψ00100
	Houston, TX 77002			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	\$)	
Attorney				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
06/06/2023	Crain, Stephen			\$75.00
	Contributor address; City; State; Zip Code			
	Usuates TV 77000			
Dringing occu	Houston, TX 77002			
Attorney	ipation / Job title (See Instructions)	Employer (See Instructions	;)	
		<u> </u>		
Date 05/02/2023	Full name of contributor out-of-state PAC (ID#: Croffie, Brandi)	Amount of Contribution (\$)	\$75.00
03/02/2023				Φ10.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77056			
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> \$)	
Attorney	•			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 14/48 Rpt: 17/74
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Harris Count	ty Democratic Lawyers' Association Inc.		00055728
4 Date 04/11/2023	5 Full name of contributor out-of-state PAC (ID#: Cryer, Linda)	7 Amount of Contribution (\$)\$35.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77098		
8 Principal occu Attorney	ipation / Job title (See Instructions)	9 Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/10/2023	Cryer, Linda	/	\$35.00
01/10/2020			
	Continuation address, City, State, Zip Code		
	Houston, TX 77098		
Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
04/25/2023	Cryer, Linda		\$35.00
	Contributor address; City; State; Zip Code		
Duin ringt again	Houston, TX 77098		<u> </u>
Principal occu Attorney	ipation / Job title (See Instructions)	Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/31/2023	Dang, Kimberly		\$35.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77098		
Principal occu Attorney	ipation / Job title (See Instructions)	Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/18/2023	Dang, Kimberly		\$35.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77098		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i
Attorney			

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 15/48 Rpt: 18/74
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Harris Coun	ty Democratic Lawyers' Association Inc.		00055728
4 Date 03/07/2023	5 Full name of contributor out-of-state PAC (ID#: Dang, Kimberly)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77098		
8 Principal occu Attorney	ipation / Job title (See Instructions)	9 Employer (See Instructions	3)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/14/2023	Dennis, Patrick		\$75.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77019		<u> </u>
Principal occu Attorney	ipation / Job title (See Instructions)	Employer (See Instructions	s)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/18/2023	Dennis, Patrick		\$70.00
	Contributor address; City; State; Zip Code Houston, TX 77019		
Principal occu Attorney	ipation / Job title (See Instructions)	Employer (See Instructions	s)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/27/2023	Dougherty, Judy		\$75.00
	Contributor address; City; State; Zip Code		
Dringinglassy	Houston, TX 77007		
Attorney	ipation / Job title (See Instructions)	Employer (See Instructions	5)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/10/2023	Dougherty, Judy		\$105.00
	Contributor address; City; State; Zip Code		
Deine im alla	Houston, TX 77007		
-	ipation / Job title (See Instructions)	Employer (See Instructions	5)
Attorney			

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 16/48 Rpt: 19/74
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ty Democratic Lawyers' Association Inc.		00055728
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
05/02/2023	Dougherty, Judy		\$70.0
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77007		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u>,</u>
Attorney			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
02/14/2023	Doyle, Michael		\$75.0
	Houston, TX 77019		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)
Attorney			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/07/2023	Doyle, Michael		\$70.
	Contributor address; City; State; Zip Code		
	Houston, TX 77019		
	upation / Job title (See Instructions)	Employer (See Instructions)
Attorney		<u> </u>	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/07/2023	Doyle, Michael		\$35.0
	Contributor address; City; State; Zip Code		
	Houston, TX 77019		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Attorney	, , , , , , , , , , , , , , , , , , ,		,
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)
02/07/2023	Doyle, Michael		\$35.
-	Contributor address; City; State; Zip Code	,	
	Houston, TX 77019		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)
Attorney			

The Instru	uction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 17/48 Rpt: 20/74
2 FILER NAMI	Ξ		3 Filer ID (Ethics Commission Filers)
Harris Cou	nty Democratic Lawyers' Association Inc.		00055728
4 Date 02/07/2023	5 Full name of contributor out-of-state PAC (ID#: Doyle, Michael)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77019		
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instructions	
Attorney			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/07/2023			\$105.00
	Contributor address; City; State; Zip Code Houston, TX 77019		
Principal occ	I upation / Job title (See Instructions)	Employer (See Instructions) ;)
Attorney			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
03/07/2023			\$35.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77019		
Principal occ Attorney	upation / Job title (See Instructions)	Employer (See Instructions	s)
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
01/18/2023			\$35.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77002		
Principal occ Court Mana	upation / Job title (See Instructions) ager	Employer (See Instructions))
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/27/2023	Driscoll, Victor		\$75.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77005		
	upation / Job title (See Instructions)	Employer (See Instructions	
Attorney			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 18/48 Rpt: 21/74	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
	ty Democratic Lawyers' Association Inc.		00055728	/
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
02/22/2023	Driscoll, Victor			\$35.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77005			
	upation / Job title (See Instructions)	9 Employer (See Instructions))	
Attorney				
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
06/21/2023	Duble, Steven			\$75.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77002			
	upation / Job title (See Instructions)	Employer (See Instructions))	
Attorney				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
03/07/2023	Duble, Steven			\$70.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77002			
	upation / Job title (See Instructions)	Employer (See Instructions))	
Attorney				
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
05/23/2023	Edwards, Amanda			\$75.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77288			
-	upation / Job title (See Instructions)	Employer (See Instructions))	
Attorney				
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
01/18/2023	Engelhart, Michael			\$35.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77002			
-	upation / Job title (See Instructions)	Employer (See Instructions))	
Attorney				

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The Instru	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 19/48 Rpt: 22/74	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
	ty Democratic Lawyers' Association Inc.		00055728	-,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
06/27/2023	Ericksen, Joanne		\$75	5.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77063			
	pation / Job title (See Instructions)	9 Employer (See Instructions))	
Attorney				
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
05/23/2023	Faulkner, Velda		\$75	5.00
	Contributor address; City; State; Zip Code			
Dringing ago	Houston, TX 77042		<u> </u>	
	ipation / Job title (See Instructions)	Employer (See Instructions))	
Attorney		<u> </u>		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
04/04/2023	Feldman, Cris		\$75	5.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77098			
Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
Attorney)	
Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
Dale 06/27/2023	Full name of contributor out-of-state PAC (ID#: Feldman, Cristen)		5.00
0012112020			Ψι	5.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77098			
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions))	
Attorney	•			
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/18/2023	Flood Nugent, Mary			5.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77002			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
Benefits Mar	nager			

	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 20/48 Rpt: 23/74
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Harris Count	ty Democratic Lawyers' Association Inc.		00055728
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	03/07/2023	Garza, Madeline		\$35.00
	I	6 Contributor address; City; State; Zip Code		
	I			
	I			
Ļ	Dringing oppu	Houston, TX 77019	Employer (Cool Instructions	、
8	Principal occu Student	pation / Job title (See Instructions)	9 Employer (See Instructions	5)
			<u> </u>	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	01/18/2023			\$35.00
	I	Contributor address; City; State; Zip Code		
	I			
	I	Houston, TX 77020		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	() ()
	Election Jude			7
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	05/31/2023	Gomez, Michael		\$75.00
	00,02,222	Contributor address; City; State; Zip Code		
	I			
	l			
		Houston, TX 77002		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	
	Attorney			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	05/31/2023	Guice, Ashley M		\$75.00
	I	Contributor address; City; State; Zip Code		
	l			
	l			
	Drive sized, oppu	Houston, TX 77002	Englisher (Cas Instructions	、
	Attorney	pation / Job title (See Instructions)	Employer (See Instructions	5)
╘				
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/27/2023	Guttman, Alan		\$75.00
	l	Contributor address; City; State; Zip Code		
	I			
	l	Houston, TX 77096		
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)
	Attorney			7
⊢				

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 21/48 Rpt: 24/74	
2	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
	Harris Coun	ty Democratic Lawyers' Association Inc.			00055728	
4	Date 04/04/2023	5 Full name of contributor out-of-state PAC (ID#: Guttman, Alan)	7	Amount of Contribution (\$)	\$35.00
		6 Contributor address; City; State; Zip Code		ł		·
		Houston, TX 77096				
8	Principal occu Attorney	ipation / Job title (See Instructions)	9 Employer (See Instructions)	3)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	01/10/2023	Harrison, Ronnie				\$250.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77002				
┢─	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
	Attorney	,		-,		
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	02/14/2023	Harrison, Ronnie			· · · · · · · · · · · · · · · · · · ·	\$70.00
	-	Contributor address; City; State; Zip Code		ł		
		Houston, TX 77002				
	Principal occu Attorney	ipation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	04/18/2023	Hartman, Robin				\$35.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77008				
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions)	<u>-</u> 3)		
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	01/18/2023	Hartman, Robin				\$35.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77008				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Attorney					

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 22/48 Rpt: 25/74	
2 FILER NAME			3 Filer ID (Ethics Commission	n Filers)
Harris Count	ty Democratic Lawyers' Association Inc.		00055728	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
05/09/2023	Hartman, Robin			\$35.00
	6 Contributor address; City; State; Zip Code			
	Lisuaten TV 77000			
Drincinal occu	Houston, TX 77008 Ipation / Job title (See Instructions)	9 Employer (See Instructions)	۱	
Attorney				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
06/13/2023	Higgins, Sean			\$75.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77046			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Attorney	, , , , , , , , , , , , , , , , , , ,		,	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
06/27/2023	Hightower, Richard			\$75.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77002	1		
Principal occu Attorney	ipation / Job title (See Instructions)	Employer (See Instructions))	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
02/14/2023	Homsi, Sammy			\$25.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77046			
Princinal occu	ipation / Job title (See Instructions)	Employer (See Instructions))	
Attorney)	
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
01/11/2023	Hopkins, Randall	/		\$540.96
	Contributor address; City; State; Zip Code			-
	Portland, OR 97212			
-	pation / Job title (See Instructions)	Employer (See Instructions))	
Consultant				

	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 23/48 Rpt: 26/74
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
		y Democratic Lawyers' Association Inc.		00055728
4	Date	5 Full name of contributor out-of-state PAC (ID#	t:)	7 Amount of Contribution (\$)
	02/07/2023	Horwitz, Noah		\$250.00
		6 Contributor address; City; State; Zip Code		
			Ĩ	
		Houston, TX 77002	1	
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)
	Attorney			
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
	02/14/2023	Horwitz, Noah		\$75.00
		Contributor address; City; State; Zip Code		
		Houston, TX 77002		
		pation / Job title (See Instructions)	Employer (See Instructions	5)
	Attorney			
	Date	Full name of contributor out-of-state PAC (ID#	t:)	Amount of Contribution (\$)
	02/14/2023	Hunter, Charles		\$140.00
		Contributor address; City; State; Zip Code		1
		Houston, TX 77027	-	
		pation / Job title (See Instructions)	Employer (See Instructions	6)
	Attorney			
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	t:)	Amount of Contribution (\$)
	03/07/2023	Isaak, David		\$35.00
		Contributor address; City; State; Zip Code		
		Houston, TX 77002	_	
		pation / Job title (See Instructions)	Employer (See Instructions	5)
	Attorney			
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	t:)	Amount of Contribution (\$)
	01/18/2023	Jefferson, Dwight		\$35.00
		Contributor address; City; State; Zip Code		
		Houston, TX 77002		
		pation / Job title (See Instructions)	Employer (See Instructions	5)
	Attorney			

	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 24/48 Rpt: 27/74	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Harris Coun	ty Democratic Lawyers' Association Inc.			00055728	
	Date 02/22/2023	5 Full name of contributor out-of-state PAC (ID#: Jones, Chase)	7	Amount of Contribution (\$)	\$35.00
		6 Contributor address; City; State; Zip Code				
		Humble, TX 77346				
	Principal occu Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor Out-of-state PAC (ID#:	·)	—	Amount of Contribution (\$)	
	01/10/2023	Full name of contributor out-of-state PAC (ID#: Jones, Henry	/			\$35.00
	0111012020	Contributor address; City; State; Zip Code		-		Ψ00.00
		Continution address, City, State, Zip Code				
		1				
		Houston, TX 77077				
	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Attorney					
	Date	Full name of contributor out-of-state PAC (ID#:_		Γ	Amount of Contribution (\$)	
	05/23/2023	Kallinen, Randall			•••	\$75.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77012				
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Attorney					
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	04/11/2023	Kennedy, Mary				\$35.00
		Contributor address; City; State; Zip Code		1		
		1				
		Houston, TX 77007				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u>ار</u>		
	Attorney			5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Τ	Amount of Contribution (\$)	
	01/18/2023	Kennedy, Mary	/		Allount of contribution (+)	\$35.00
	0_,	Contributor address; City; State; Zip Code		-		T-- -
		1				
		Houston, TX 77007				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Attorney					

	The Instru	ction Guide explains how to complete this fo	orm.		Total pages Schedule A1: Sch: 25/48 Rpt: 28/74	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		ty Democratic Lawyers' Association Inc.			00055728	/
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	05/09/2023	King, Vivian				\$250.00
	I	6 Contributor address; City; State; Zip Code				
_	Drinsipal agai	Houston, TX 77002	Contructions			
ö	Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions)	5)		
╞			<u> </u>	1		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	ቀንፍ በበ
	05/09/2023					\$35.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77002				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	1 5)		
	Attorney					
=	Date	Full name of contributor Out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/14/2023	Knauth, Tonya			· · · · · · · · · · · · · · · · · · ·	\$35.00
	I	Contributor address; City; State; Zip Code				
		Houston, TX 77008				
		pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Attorney					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/27/2023	Kretzer, Seth				\$75.00
	I	Contributor address; City; State; Zip Code				
		Houston, TX 77002				
	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u>ا</u>		
	Attorney			<i>)</i>		
	Date	Full name of contributor Out-of-state PAC (ID#:		I	Amount of Contribution (\$)	
	06/27/2023	Leisten, Denise	/			\$75.00
	00,2.,2	Contributor address; City; State; Zip Code				******
		Houston, TX 77027				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Attorney					
		·				

	The Instruc	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 26/48 Rpt: 29/74
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
		y Democratic Lawyers' Association Inc.		00055728
4	Date	5 Full name of contributor Dut-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
	06/21/2023	Lewis, Colby		\$75.00
		6 Contributor address; City; State; Zip Code		
		Houston, TX 77002	-	
8		pation / Job title (See Instructions)	9 Employer (See Instructions	3)
	Attorney			
	Date	Full name of contributor Dut-of-state PAC (ID#:_)	Amount of Contribution (\$)
	06/21/2023	Li, Peggy		\$50.00
		Contributor address; City; State; Zip Code		
		Washington, DC 20005		
		pation / Job title (See Instructions)	Employer (See Instructions	5)
	Attorney			
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/27/2023	Litton, Todd		\$75.00
		Contributor address; City; State; Zip Code		
		Houston, TX 77030		
	-	pation / Job title (See Instructions)	Employer (See Instructions	5)
	Attorney			
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	05/09/2023	Lockett, Elizabeth		\$35.00
		Contributor address; City; State; Zip Code		
		Sugar Land, TX 77478		
	-	pation / Job title (See Instructions)	Employer (See Instructions	5)
	Attorney			
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	03/21/2023	Lucido, Rita		\$75.00
		Contributor address; City; State; Zip Code		1
		Houston, TX 77019		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
	Attorney			
1				

	The Instruc	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 27/48 Rpt: 30/74
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
		y Democratic Lawyers' Association Inc.		00055728
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	01/04/2023	Lucido, Rita		\$35
		6 Contributor address; City; State; Zip Code		
		Houston, TX 77019	-	
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)
	Attorney			
	Date	Full name of contributor Dut-of-state PAC (ID#:_)	Amount of Contribution (\$)
	03/02/2023	Lucido, Rita		\$35
		Contributor address; City; State; Zip Code		
		Houston, TX 77019		
		pation / Job title (See Instructions)	Employer (See Instructions	s)
	Attorney			
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	03/02/2023	Lucido, Rita		\$35.
		Contributor address; City; State; Zip Code		
		Houston, TX 77019		
		pation / Job title (See Instructions)	Employer (See Instructions	s)
	Attorney			
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	01/24/2023	Maines, William		\$35.
		Contributor address; City; State; Zip Code		
		Houston, TX 77056		
		pation / Job title (See Instructions)	Employer (See Instructions	s)
	Attorney			
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/27/2023	Manji, Abel		\$75.
		Contributor address; City; State; Zip Code		
		Sugar Land, TX 77479		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	Attorney			

The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 28/48 Rpt: 31/74
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Harris Count	ty Democratic Lawyers' Association Inc.		00055728
4 Date 01/10/2023	5 Full name of contributor out-of-state PAC (ID#: Manne, Burton)	7 Amount of Contribution (\$)\$35.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77027		
8 Principal occu Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/09/2023	Manne, Burton		\$35.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77027		
Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/09/2023	Markowski, Kevin		\$35.00
	Contributor address; City; State; Zip Code Houston, TX 77002		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)
Attorney			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/21/2023	Martin, Grant		\$75.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75204		
Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/31/2023	McCreight, Henry		\$75.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77042		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)
Attorney			

	The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 29/48 Rpt: 32/74	
2	FILER NAME			3 Filer ID (Ethics Commission Filers	s)
		ty Democratic Lawyers' Association Inc.		00055728	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
	06/27/2023	Michel, Arturo		\$75	5.00
		6 Contributor address; City; State; Zip Code			
		Houston, TX 77002	-		
		pation / Job title (See Instructions)	9 Employer (See Instructions	3)	
	Attorney				
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
	04/18/2023	Michel, Arturo		\$70	0.00
		Contributor address; City; State; Zip Code			
		Houston, TX 77002			
		pation / Job title (See Instructions)	Employer (See Instructions	5)	
	Attorney				
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
	05/16/2023	Middleton, Kanika		\$75	5.00
		Contributor address; City; State; Zip Code			
		Houston, TX 77073			
		pation / Job title (See Instructions)	Employer (See Instructions	3)	
	Attorney				
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
	06/27/2023	Miles, Melanie		\$75	5.00
		Contributor address; City; State; Zip Code			
		Houston, TX 77025	1		
		pation / Job title (See Instructions)	Employer (See Instructions	3)	
	Attorney				
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
	03/28/2023	Miller, Ross		\$75	5.00
		Contributor address; City; State; Zip Code			
		Houston, TX 77034			
		pation / Job title (See Instructions)	Employer (See Instructions	3)	
	Attorney				

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 30/48 Rpt: 33/74
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Harris Coun	ty Democratic Lawyers' Association Inc.		00055728
4 Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7 Amount of Contribution (\$)
05/16/2023	Mitcham, David		\$75.0
	6 Contributor address; City; State; Zip Code		
• Drincinal occu	Houston, TX 77002 pation / Job title (See Instructions)	9 Employer (See Instructions	A
Attorney)
Date	Full name of contributor 🔲 out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
05/09/2023	Mitcham, David		\$35.0
	Contributor address; City; State; Zip Code		
	Houston, TX 77002		
Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Attorney)
Date	Full name of contributor Out-of-state PAC (ID#	<u>и</u> .	Amount of Contribution (\$)
01/31/2023	Full name of contributor out-of-state PAC (ID# Mladenka-Fowler, Beatrice	¢:)	Amount of Contribution (\$) \$70.0
01/01/2020	Contributor address; City; State; Zip Code		+
	Continuation address, City, State, Zip Code		
	Houston, TX 77008		
	pation / Job title (See Instructions)	Employer (See Instructions)
Retired			
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
05/02/2023	Montemayor, Melissa		\$35.0
	Contributor address; City; State; Zip Code		
	Houston, TX 77292		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	() ()
Attorney)
Date	Full name of contributor Out-of-state PAC (ID#		Amount of Contribution (\$)
05/02/2023	Montemayor, Melissa	r	\$50.0
	Contributor address; City; State; Zip Code		
	······································		
	Houston, TX 77292		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
Attorney			

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 31/48 Rpt: 34/74	
2 FILER NAME			3 Filer ID (Ethics Commission F	ilers)
Harris Coun	ty Democratic Lawyers' Association Inc.		00055728	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
06/21/2023	Morgan, Monica			\$75.00
	6 Contributor address; City; State; Zip Code			
- · · ·	Pearland, TX 77581		-	
	upation / Job title (See Instructions)	9 Employer (See Instructions	6)	
Attorney		<u> </u>		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/31/2023				\$35.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77008			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	() ()	
Attorney			7	
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of Contribution (\$)	
01/18/2023	Mostyn, Amber	/		\$35.00
01,10,101	Contributor address; City; State; Zip Code			Ψ00100
	Houston, TX 77027			
	ipation / Job title (See Instructions)	Employer (See Instructions	;)	
Attorney				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
05/09/2023	Muessig, William			\$35.00
	Contributor address; City; State; Zip Code			
	Deutourn TV 77501			
Dringing occu	Baytown, TX 77521 upation / Job title (See Instructions)	Employer (See Instructions		
Attorney		Employer (See Instructions	<i>i)</i>	
		<u> </u>		
Date 04/18/2023	Full name of contributor out-of-state PAC (ID#: Mullin, Michele)	Amount of Contribution (\$)	\$35.00
04/10/2025				430.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77098			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Attorney				
		.1		

	The Instru	ction Guide explains how to complete this	form.		s Schedule A1: 8 Rpt: 35/74	
2	FILER NAME			3 Filer ID (Ethics Commission	n Filers)
		y Democratic Lawyers' Association Inc.		00055728		/
4	Date	5 Full name of contributor out-of-state PAC (ID#	t:)	7 Amount of	Contribution (\$)	
	02/14/2023	Mullin, Michele				\$35.00
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77098				
8		pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Attorney					
	Date	Full name of contributor out-of-state PAC (ID#	t:)	Amount of	Contribution (\$)	
	03/07/2023	Mullin, Michele				\$35.00
		Contributor address; City; State; Zip Code				
		Houston TX 77009				
	Dringing ago	Houston, TX 77098	Employer (Cap Instructions	<u>\</u>		
	Attorney	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date	Full name of contributor Out-of-state PAC (ID#	ť:)	Amount of	Contribution (\$)	+05 00
	01/24/2023	Mytelka, Andrew				\$35.00
		Contributor address; City; State; Zip Code				
		Galveston, TX 77550				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Attorney)		
	Date			Amount of	Contribution (*)	
	01/24/2023	Full name of contributor Out-of-state PAC (ID#	r:)	Amount of	Contribution (\$)	\$35.00
	01/24/2023	-				φ35.00
		Contributor address; City; State; Zip Code				
		Galveston, TX 77550				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Attorney	, , ,		, ,		
	Date	Full name of contributor out-of-state PAC (ID#	μ	Amount of	Contribution (\$)	
	06/13/2023	Nechman, John)			\$75.00
	00,20,2020	Contributor address; City; State; Zip Code				<i>+</i> 10100
		contributor address, ony, state, zip code				
		Houston, TX 77057				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Attorney					

The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 33/48 Rpt: 36/74
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Harris Count	ty Democratic Lawyers' Association Inc.		00055728
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
03/07/2023	Nechman, John		\$70.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77057		
8 Principal occu	l	9 Employer (See Instructions)) ;)
Attorney			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/22/2023	Nichols, Michael		\$35.00
	Contributor address; City; State; Zip Code		
	11		
Dringing occu	Houston, TX 77005	Employer (Soo Instructions	
Attorney	pation / Job title (See Instructions)	Employer (See Instructions))
Date	Full name of contributor Out-of-state PAC (ID#:	, I	Amount of Contribution (\$)
04/18/2023	Full name of contributor out-of-state PAC (ID#: Norwood, Greg)	\$35.00 \$35.00
07,10,2020			+
	Houston, TX 77019		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))
Non-Attorne	y		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
04/18/2023	O'Rourke, Terry		\$35.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77025		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))
Attorney			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/27/2023	OHarra, Catherine		\$75.00
	Contributor address; City; State; Zip Code		
	Bellaire, TX 77401		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>,</u>
Attorney			,

SCHEDULE A1

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 34/48 Rpt: 37/74	
2 FILER NAME			3 Filer ID (Ethics Commission	1 Filers)
	ty Democratic Lawyers' Association Inc.		00055728	
4 Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7 Amount of Contribution (\$)	
05/23/2023	Olive, Kenneth			\$75.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77002			
-	upation / Job title (See Instructions)	9 Employer (See Instructions))	
Consultant				
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
05/23/2023	Olive, Kenneth			\$35.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77002			
	upation / Job title (See Instructions)	Employer (See Instructions))	
Consultant				
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
05/02/2023	Olivo, Dora			\$250.00
	Contributor address; City; State; Zip Code			
	Richmond, TX 77469			
-	upation / Job title (See Instructions)	Employer (See Instructions))	
Attorney				
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
04/04/2023				\$75.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77002			
Brincipal occu		Employer (See Instructions)	<u> </u>	
Attorney	upation / Job title (See Instructions)	Employer (See Instructions))	
	<u> </u>			
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	ቀጋር በበ
06/27/2023	Patronella, David			\$75.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77206			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>	
Retired)	

SCHEDULE A1

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 35/48 Rpt: 38/74
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ty Democratic Lawyers' Association Inc.		00055728
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
02/14/2023	Patronella, David		\$35.0
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77002		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>
Attorney	parton / 000 and (000 and 000 a		,
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/18/2023	Patronella, David		\$35.0
	Contributor address; City; State; Zip Code		
	Houston, TX 77206		
	upation / Job title (See Instructions)	Employer (See Instructions	;)
Attorney			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/27/2023	Pedersen, Nicole		\$75.0
	Contributor address; City; State; Zip Code		
	Houston, TX 77008		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>
Attorney			<i>י</i>
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/18/2023	Pesikoff, Bette		\$35.0
	Contributor address; City; State; Zip Code		
	Houston, TX 77098		
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	l 3)
Attorney	· ·		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/18/2023	Peterson, Denise		\$35.0
	Contributor address; City; State; Zip Code		
	Houston, TX 77003		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)
Mediator			

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 36/48 Rpt: 39/74
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Harris Coun	ty Democratic Lawyers' Association Inc.		00055728
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
02/14/2023	Piggee, Kennard		\$35.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77008		
	pation / Job title (See Instructions)	9 Employer (See Instructions	s)
Attorney			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/28/2023	Prim, April		\$70.00
	Contributor address; City; State; Zip Code		
Driveria e La seco	The Woodlands, TX 77380	Frankriger (One handworther	
Attorney	pation / Job title (See Instructions)	Employer (See Instructions	S)
_			1
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/07/2023	Pyke, Cody		\$75.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77027		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
Attorney	, , , ,		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
04/18/2023	Radnofsky, Barbara		\$500.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77339		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
Attorney			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/28/2023	Ramirez, Annette		\$75.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77073		
	pation / Job title (See Instructions)	Employer (See Instructions	s)
Attorney			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 37/48 Rpt: 40/74	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		y Democratic Lawyers' Association Inc.			00055728	,
4	Date	5 Full name of contributor out-of-state PAC (II	D#:)	7	Amount of Contribution (\$)	
	02/14/2023	Ramirez, Annette				\$35.00
		6 Contributor address; City; State; Zip Code		1		
		Houston, TX 77073				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Attorney					
	Date	Full name of contributor out-of-state PAC (II	D#:)	Ī	Amount of Contribution (\$)	
	06/27/2023	Ramsey, Judith				\$75.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77002				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney					
	Date	Full name of contributor 🛛 out-of-state PAC (II	D#:)		Amount of Contribution (\$)	
	05/09/2023	Reagin, Shawna				\$75.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77002				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney					
	Date	Full name of contributor 🛛 out-of-state PAC (II	D#:)		Amount of Contribution (\$)	
	06/27/2023	Redford, David				\$75.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77027				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney					
	Date	Full name of contributor 🛛 out-of-state PAC (II	D#:)		Amount of Contribution (\$)	
	05/09/2023	Riley, Timothy				\$35.00
		Contributor address; City; State; Zip Code]		
		Houston, TX 77007	<u>.</u>			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney					
1						

SCHEDULE	A1
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	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 38/48 Rpt: 41/74	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
		y Democratic Lawyers' Association Inc.			00055728	,
4	Date	5 Full name of contributor out-of-state PAC (ID#	:)	7	Amount of Contribution (\$)	
	05/16/2023	Robbins, Tina Zahabi				\$75.00
		6 Contributor address; City; State; Zip Code				
		Pearland, TX 77581				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Attorney					
	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	02/22/2023	Robinson, Cawlyn				\$25.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77002				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney					
F	Date	Full name of contributor out-of-state PAC (ID#	······)		Amount of Contribution (\$)	
	01/24/2023	Robinson, Jane				\$35.00
		Contributor address; City; State; Zip Code		ĺ		
		Houston, TX 77010	- i			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney					
Γ	Date	Full name of contributor out-of-state PAC (ID#	:)	Γ	Amount of Contribution (\$)	
	01/31/2023	Roehm, Susan				\$35.00
		Contributor address; City; State; Zip Code				
	Drive in all a serv	Austin, TX 78746		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney					
	Date	Full name of contributor out-of-state PAC (ID#:	:)		Amount of Contribution (\$)	÷== 00
	05/31/2023	Roth, Andrea				\$75.00
		Contributor address; City; State; Zip Code				
		Houston TX 77007				
	Dringinglaggy	Houston, TX 77007	Employer (Cap Instructions			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney					

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 39/48 Rpt: 42/74	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Harris Count	y Democratic Lawyers' Association Inc.			00055728	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	02/14/2023	Rutter, Kent				\$35.00
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77010				
		pation / Job title (See Instructions)	9 Employer (See Instructions)	5)		
	Attorney					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	05/31/2023	Sandill- Other, Ravi				\$75.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77002				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Judge			5)		
_			<u> </u>	<u> </u>	Amount of Contribution (\$)	
	Date 06/13/2023	Full name of contributor out-of-state PAC (ID#: Sepolio, Donald)		Amount of Contribution (\$)	\$75.00
	00/13/2023					Φι Ο.Ου
		Contributor address; City; State; Zip Code				
		Houston, TX 77006				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	05/09/2023	Shanklin, Paul				\$35.00
		Contributor address; City; State; Zip Code				
	Dringing ago	Houston, TX 77002	Employer (Coo Instructions			
	Attorney	pation / Job title (See Instructions)	Employer (See Instructions	5)		
				1		
	Date	Full name of contributor out-of-state PAC (ID#: Shaw Campaign Shaw, Penny)		Amount of Contribution (\$)	ቀደብ ባብ
	05/23/2023					\$50.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77292				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Attorney		· · ·			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 40/48 Rpt: 43/74	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Harris Coun [,]	ty Democratic Lawyers' Association Inc.			00055728	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/27/2023	Shelnut, Katie				\$15.00
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77019				
8			9 Employer (See Instructions)	5)		
	Non-Attorney	/				
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	04/18/2023	Shepard, E Kay				\$35.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77002				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u> יו		
	Non-Attorney			<i>''</i>		
╞	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/14/2023	Shepard, E Kay	/			\$35.00
	02/2 2:=:					400
		Houston, TX 77002				
		pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Non-Attorney	/				
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/14/2023	Simoneaux, Jerry				\$35.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77002				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ו)		
	Attorney		 ,	''		
╞	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	05/09/2023	Simoneaux, Jerry	/		Allount of Contribution (+,	\$35.00
		Contributor address; City; State; Zip Code				• -
		Houston, TX 77002				
		pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Judge					

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 41/48 Rpt: 44/74
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ty Democratic Lawyers' Association Inc.		00055728
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
03/28/2023	Singleton, Eric		\$35
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77002		
8 Principal occu Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions))
		<u> </u>	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/18/2023	Singleton, Eric		\$35
	Contributor address; City; State; Zip Code		
	Houston, TX 77002		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)
Attorney			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/22/2023	Singleton, Eric		\$35
	Contributor address; City; State; Zip Code		
Dringing oppu	Houston, TX 77002	Employer (Coo Instructions	\
Attorney	pation / Job title (See Instructions)	Employer (See Instructions))
Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)
05/09/2023	Full name of contributor out-of-state PAC (ID#: Singleton, Eric)	Amount of Contribution (\$) \$35.
00/00/2020	Contributor address; City; State; Zip Code		+
	Contributor address, Ony, State, Zip Code		
	Houston, TX 77002		
	pation / Job title (See Instructions)	Employer (See Instructions))
Attorney			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/31/2023	Small, William		\$75
	Contributor address; City; State; Zip Code		
	Houston, TX 77056		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u>)</u>
Attorney)
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SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 42/48 Rpt: 45/74	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		ty Democratic Lawyers' Association Inc.			00055728	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	02/14/2023	Smith, Kingsley				\$105.00
		6 Contributor address; City; State; Zip Code				
Ļ		Houston, TX 77010				
8			9 Employer (See Instructions)	5)		
L	Marketing Di			_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/07/2023	Smith, Melissa				\$35.00
		Contributor address; City; State; Zip Code				
		Humble, TX 77346				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	Attorney	, , , , , , , , , , , , , , , , , , ,	——————————————————————————————————————	,		
⊢	Date	Full name of contributor out-of-state PAC (ID#:)	Ι	Amount of Contribution (\$)	
	01/10/2023	Snively, Judith	/		Allount of Continuescon (4)	\$35.00
	•	Contributor address; City; State; Zip Code				7
		Houston, TX 77002				
		pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Attorney					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/21/2023	Snow, Joellen				\$75.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77008				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	 ;)		
	Attorney		poje (===	,		
⊨	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	01/18/2023	Snow, Joellen	,			\$35.00
	-	Contributor address; City; State; Zip Code				
		Houston, TX 77008				
Γ		pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Attorney					
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SCHEDULE	A1
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The Instruc	ction Guide explains how to complete this f	orm.		otal pages Schedule A1: ch: 43/48 Rpt: 46/74	
2 FILER NAME				ler ID (Ethics Commission	Filers)
	Harris County Democratic Lawyers' Association Inc.			0055728	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 An	mount of Contribution (\$)	
05/31/2023	Spain, Charles				\$35.00
	6 Contributor address; City; State; Zip Code				
	Houston, TX 77002	Contructions	、 、		
Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions	;) 		
Date	Full name of contributor out-of-state PAC (ID#:)	An	mount of Contribution (\$)	
05/09/2023	Spain, Charles				\$35.00
	Contributor address; City; State; Zip Code				
	Houston, TX 77002				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
Attorney	,		,		
Date	Full name of contributor out-of-state PAC (ID#:)	An	mount of Contribution (\$)	
06/13/2023	Stone, Nancy			• •	\$75.00
	Contributor address; City; State; Zip Code				
	Sugar Land, TX 77479				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Attorney					
Date	Full name of contributor out-of-state PAC (ID#:)	An	mount of Contribution (\$)	
06/13/2023	Svetlik, Frank				\$75.00
	Contributor address; City; State; Zip Code				
	Houston, TX 77024				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	() ()		
Attorney					
Date	Full name of contributor out-of-state PAC (ID#:)	An	mount of Contribution (\$)	
06/27/2023	Swafford, Robert				\$75.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78704				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	:)		
Attorney	······································	, . , . ,	,		
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SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 44/48 Rpt: 47/74	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		y Democratic Lawyers' Association Inc.			00055728	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	05/16/2023	Trachtenberg, Brian				\$105.00
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77006				
8		pation / Job title (See Instructions)	9 Employer (See Instructions)	5)		
	Attorney					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/10/2023	Trachtenberg, Brian				\$35.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77006				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> יו		
	Attorney			<i>''</i>		
-	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	01/10/2023	Trachtenberg, Brian	/			\$35.00
	01,10,111	Contributor address; City; State; Zip Code				+
		Houston, TX 77006				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/10/2023	Trachtenberg, Brian				\$35.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77006				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ו)		
	Attorney			''		
⊢	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	05/16/2023	Trachtenberg, Brian				\$45.00
	-	Contributor address; City; State; Zip Code				
		Houston, TX 77006				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney					

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 45/48 Rpt: 48/74
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ty Democratic Lawyers' Association Inc.		00055728
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
01/18/2023	Vinson, Alia		\$35.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77027		
	ipation / Job title (See Instructions)	9 Employer (See Instructions)	;)
Attorney			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
02/14/2023	Vonder Haar, Victoria		\$75.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77292		
Princinal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u></u>
Attorney			יע ע
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Amount of Contribution (\$)
02/14/2023	Vonder Haar, Victoria	/	\$35.00
021112020	Contributor address; City; State; Zip Code		+
	Houston, TX 77292		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)
Attorney			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/21/2023	Wallenstein, Joshua		\$75.00
	Contributor address; City; State; Zip Code		
	Hauston TV 77077		
Dringing occu	Houston, TX 77077		
Attorney	ipation / Job title (See Instructions)	Employer (See Instructions	<i>i</i>)
		<u> </u>	
Date 06/27/2023	Full name of contributor out-of-state PAC (ID#: Walsh, Julia)	Amount of Contribution (\$) \$75.00
0012112025			φτο.ου
	Contributor address; City; State; Zip Code		
	Houston, TX 77027		
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	L 3)
Administrativ	ve Manager		

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 46/48 Rpt: 49/74	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
		y Democratic Lawyers' Association Inc.			00055728	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	03/07/2023	Walsh, Julia				\$35.00
		6 Contributor address; City; State; Zip Code				
Ļ		Houston, TX 77027				
8			9 Employer (See Instructions)	5)		
	Administrativ					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/18/2023	Walton, Larry				\$75.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77018				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	Attorney		——————————————————————————————————————	,		
╞	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/31/2023	Wells, Clinton	,			\$75.00
	-	Contributor address; City; State; Zip Code				
		Houston, TX 77002				
		pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Attorney					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/13/2023	Wells, Clinton				\$75.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77002				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u>ا</u> 5)		
	Attorney					
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/31/2023	Wells, Clinton				\$35.00
		Contributor address; City; State; Zip Code				
	<u> </u>	Houston, TX 77002				
		pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Attorney					

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	1	Total pages Schedule A1: Sch: 47/48 Rpt: 50/74		
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		ty Democratic Lawyers' Association Inc.			00055728	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	06/27/2023	Williams, Kelcey				\$75.00
		6 Contributor address; City; State; Zip Code				
Ļ		Austin, TX 78705				
8		pation / Job title (See Instructions)	9 Employer (See Instructions)	5)		
	Attorney			-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	05/09/2023	Willms, David				\$250.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77002				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	 ;)		
	Non-Attorne			,		
╞	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/27/2023	Wils, Helen	/		Allount of Contingation (+)	\$250.00
		Contributor address; City; State; Zip Code				·
		Houston, TX 77010				
		pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Attorney					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	05/16/2023	Wils, Helen				\$35.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77010				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Attorney			,		
╞	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	05/16/2023	Wils, Helen	,		/ mount of contraction (+)	\$15.00
	•	Contributor address; City; State; Zip Code				
		Houston, TX 77010				
	Principal occupation / Job title (See Instructions) Employer (See Instruction			5)		
	Attorney					
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SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 48/48 Rpt: 51/74	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
[Harris County Democratic Lawyers' Association Inc.				00055728	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	02/14/2023	Wisch, Steven				\$75.00
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77025				
8	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney					
⊨	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/28/2023	Yates III, Sam			, anotani or contaistation (+)	\$75.00
	00/20/2020					¢10.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77027				
⊢	Dringinglassy					
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney					
	Date	Full name of contributor 🛛 out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/27/2023 Youngdahl, Sara				\$75.00	
	Contributor address; City; State; Zip Code		1			
	Houston, TX 77006					
	Principal occupation / Job title (See Instructions) Employer (See Instructions		5)			
	Attorney					
F	Date	Full name of contributor Out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/07/2023	Zimmerer, Jerry				\$70.00
		Contributor address; City; State; Zip Code				
		Contributor address, City, State, Zip Code				
		Houston, TX 77002				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Attorney)		
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EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Sch: 1/23 Rpt: 52/74 Harris County Democratic Lawyers' Association Inc. 00055728 4 Date 5 Payee name 01/10/2023 Blue Beam LLC 6 Amount (\$) Payee address; City; State; Zip Code 7 \$800.00 10925 Wrenwood Manor Expenditure from Houston, TX 77043 corporate funds PURPOSE 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees EXPENDITURE Check if Austin, TX, officeholder living expense Fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held 9 expenditure to benefit C/OH Date Payee name 03/08/2023 Blue Beam LLC Amount (\$) Payee address; City; State; Zip Code \$250.00 10925 Wrenwood Manor Expenditure from Houston, TX 77043 corporate funds PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees EXPENDITURE Check if Austin, TX, officeholder living expense Fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/05/2023 Blue Beam LLC Amount (\$) Payee address; City: State; Zip Code \$250.00 10925 Wrenwood Manor Expenditure from corporate funds Houston, TX 77043 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees EXPENDITURE Check if Austin, TX, officeholder living expense Fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Sch: 2/23 Rpt: 53/74 Harris County Democratic Lawyers' Association Inc. 00055728 4 Date 5 Payee name 06/12/2023 Blue Beam LLC 6 Amount (\$) Payee address; City; State; Zip Code 7 \$585.00 10925 Wrenwood Manor Expenditure from Houston, TX 77043 corporate funds PURPOSE 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees EXPENDITURE Check if Austin, TX, officeholder living expense Fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held 9 expenditure to benefit C/OH Date Payee name 04/12/2023 Cadillac Bar Amount (\$) Payee address; City; State; Zip Code \$1,155.53 1802 Shepherd Expenditure from Houston, TX 77007 corporate funds PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Event Expense EXPENDITURE Check if Austin, TX, officeholder living expense Event Expenses Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/13/2023 Cadillac Bar Payee address; Amount (\$) City: State; Zip Code \$2,135.27 1802 Shepherd Expenditure from Houston, TX 77007 corporate funds PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Event Expense EXPENDITURE Check if Austin, TX, officeholder living expense Event Expenses Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Sch: 3/23 Rpt: 54/74 Harris County Democratic Lawyers' Association Inc. 00055728 4 Date 5 Payee name Cadillac Bar 01/23/2023 6 Amount (\$) Payee address; City; State; Zip Code 7 \$1,482.28 1802 Shepherd Expenditure from Houston, TX 77007 corporate funds PURPOSE 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Event Expense EXPENDITURE Check if Austin, TX, officeholder living expense Event Expenses Complete ONLY if direct Candidate/Officeholder name Office sought Office held 9 expenditure to benefit C/OH Date Payee name 03/01/2023 Cadillac Bar Amount (\$) Payee address; City; State; Zip Code \$2,230.25 1802 Shepherd Expenditure from Houston, TX 77007 corporate funds PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Event Expense EXPENDITURE Check if Austin, TX, officeholder living expense Event Expenses Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/01/2023 Cadillac Bar Payee address; Amount (\$) City: State; Zip Code \$60.44 1802 Shepherd Expenditure from Houston, TX 77007 corporate funds PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Event Expense EXPENDITURE Check if Austin, TX, officeholder living expense Event Expenses Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

Advertising Expense Accounting/Banking

Consulting Expense

Credit Card Payment

1

8

9

Date

Date

02/27/2023

Amount (\$)

Expenditure from corporate funds

PURPOSE

OF

EXPENDITURE

02/06/2023

Amount (\$)

Expenditure from

OF

EXPENDITURE

corporate funds PURPOSE

4 Date

05/08/2023 6 Amount (\$)

Expenditure from

corporate funds PURPOSE

OF

EXPENDITURE

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Sch: 4/23 Rpt: 55/74 Harris County Democratic Lawyers' Association Inc. 00055728 5 Payee name Cadillac Bar Payee address; City; State; Zip Code 7 \$1,155.53 1802 Shepherd Houston, TX 77007 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Event Expense Check if Austin, TX, officeholder living expense Event Expenses Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Carter and Hatcher Payee address; City; State; Zip Code \$52.50 PO Box 7447 Houston, TX 77248 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Consulting Expense Check if Austin, TX, officeholder living expense Consultant Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Carter and Hatcher Payee address; City; State; Zip Code \$726.82 PO Box 7447 Houston, TX 77248 (a) Category (See Categories listed at the top of this schedule) (b) Description Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Consultant

Office held

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing I	ayment/Reimbursement Solid erhead/Rental Expense Trav xpense Trav Xages/Contract Labor OTH	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 File	r ID (Ethics Commission Filers)			
Sch: 5/23 Rpt: 56/74	Harris County Democratic Lawyers' Association		055728			
-			J55720			
4 Date	5 Payee name					
04/19/2023	Carter and Hatcher					
6 Amount (\$)	7 Payee address; City; State; Zip C	ode				
\$52.50	PO Box 7447					
Expenditure from corporate funds	Houston, TX 77248					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF EXPENDITURE	Consulting Expense		Texas. Complete Schedule T.			
		Check if Austin, TX, office	holder living expense			
		Consultant				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so H	ught	Office held			
Date	Payee name					
05/22/2023	Carter and Hatcher					
Amount (\$)	Payee address; City; State; Zip C	ode				
\$70.00	PO Box 7447					
+·						
Expenditure from corporate funds	Houston, TX 77248					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Consultant						
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so H	I Jght	Office held			
Date	Payee name					
06/02/2023	Carter and Hatcher					
Amount (\$)	Payee address; City; State; Zip C	nde				
\$91.10	PO Box 7447					
Expenditure from corporate funds	Houston, TX 77248					
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	Tevas Complete Schedule T.			
EXPENDITURE						
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so H	ıght	Office held			

	EXPENDITURE CATEGORIES FOR BO	DX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayme Fees Office Overhear Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	nt/Reinbursement Solicitation/Fundraising Expense d/Rental Expense Transportation Equipment & Related Expense Travel in District e Travel Out of District /Contract Labor OTHER (enter a category not listed above)				
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 6/23 Rpt: 57/74	Harris County Democratic Lawyers' Association In	c. 00055728				
4 Date	5 Payee name					
03/15/2023	Dang, Kimberly					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$509.94	3355 West Alabama					
	Suite 1220					
Expenditure from corporate funds	Houston, TX 77098					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description				
OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense				
		Food/Beverage				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
Date	Payee name					
03/15/2023	Dang, Kimberly					
Amount (\$)	Payee address; City; State; Zip Code					
\$983.39	3355 West Alabama					
+++++++++++++++++++++++++++++++++++++++	Suite 1220					
Expenditure from corporate funds	Houston, TX 77098					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food/Beverage						
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				
Date	Payee name					
01/11/2023	Doyle LLP					
Amount (\$)	Payee address; City; State; Zip Code					
\$142.69	3401 Allen Parkway					
\$112.00	Suite 100					
Expenditure from						
corporate funds	Houston, TX 77019					
PURPOSE OF EXPENDITURE	OF Get Eacy is the target of the second at the top of this schedule of the second at the top of this schedule of Texas. Complete Schedule T.					
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					
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
Sch: 7/23 Rpt: 58/74	Harris County Democratic Lawyers' Association Inc.00055728				
4 Date 01/11/2023	5 Payee name Doyle LLP				
6 Amount (\$) \$142.69	7 Payee address; City; State; Zip Code 3401 Allen Parkway Suite 100 Houston, TX 77019				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Fees (*) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
04/05/2023	Doyle LLP				
Amount (\$)	Payee address; City; State; Zip Code				
\$142.69	3401 Allen Parkway				
	Suite 100				
Expenditure from corporate funds	Houston, TX 77019				
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees					
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
04/05/2023	Doyle LLP				
Amount (\$)	Payee address; City; State; Zip Code				
\$142.69	3401 Allen Parkway				
-	Suite 100				
Expenditure from corporate funds	Houston, TX 77019				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees 				
Complete ONLY 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						
1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commiss						
Sch: 8/23 Rpt: 59/74	Harris County Democratic Lawyers' Association Inc. 00055728					
4 Date	5 Payee name					
04/05/2023	Doyle LLP					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$142.69	3401 Allen Parkway					
	Suite 100					
Expenditure from corporate funds	Houston, TX 77019					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
04/05/2023	Doyle LLP					
Amount (\$)	Amount (\$) Payee address; City; State; Zip Code					
\$515.38	\$515.38 3401 Allen Parkway					
Evpondituro from	Suite 100					
Expenditure from corporate funds	Houston, TX 77019					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation						
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
01/11/2023	Doyle LLP					
Amount (\$)	Payee address; City; State; Zip Code					
\$120.00	3401 Allen Parkway					
	Suite 100					
Expenditure from corporate funds	Houston, TX 77019					
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Expenses 					
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						
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 9/23 Rpt: 60/74	Harris County Democratic Lawyers' Association Inc. 00055728					
4 Date	5 Payee name					
01/11/2023	Doyle LLP					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$800.00	3401 Allen Parkway					
Expenditure from	Suite 100					
corporate funds	Houston, TX 77019					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.					
	Check if Austin, TX, officeholder living expense Event Expenses					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
04/05/2023	Doyle LLP					
Amount (\$)	Payee address; City; State; Zip Code					
\$260.00	3401 Allen Parkway					
	Suite 100					
Expenditure from corporate funds	Houston, TX 77019					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Expenses						
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
01/11/2023	Doyle LLP					
Amount (\$)	Payee address; City; State; Zip Code					
\$217.87	3401 Allen Parkway					
	Suite 100					
Expenditure from corporate funds	Houston, TX 77019					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Food/Beverage Expense					
	Check if Austin, TX, officeholder living expense Food/Beverage					
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						

	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 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: 10/23 Rpt: 61/74	Harris County Democratic Lawyers' Association Inc. 00055728						
4 Date	5 Payee name						
01/11/2023	Doyle LLP						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$194.71	3401 Allen Parkway						
	Suite 100						
Expenditure from corporate funds	Houston, TX 77019						
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Food/Beverage Expense	outside of Texas. Complete Schedule T. TX, officeholder living expense G C					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held					
Date	Payee name						
01/11/2023	Doyle LLP						
Amount (\$)	Payee address; City; State; Zip Code						
\$267.03 3401 Allen Parkway							
Expenditure from corporate funds	Suite 100 Houston, TX 77019						
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description 							
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
Date	Payee name						
01/11/2023	Doyle LLP						
Amount (\$)	Payee address; City; State; Zip Code						
\$80.63	3401 Allen Parkway						
	Suite 100						
Expenditure from corporate funds	Houston, TX 77019						
PURPOSE OF EXPENDITURE	OF Ecod/Beverage 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				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 11/23 Rpt: 62/74	Harris County Democratic Lawyers' Association Inc. 00055728			
4 Date 04/05/2023	5 Payee name Doyle LLP			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$28.36	3401 Allen Parkway			
\$20.00	Suite 100			
Expenditure from				
corporate funds	Houston, TX 77019			
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food/Beverage				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
04/05/2023	Doyle LLP			
Amount (\$)	Payee address; City; State; Zip Code			
\$245.84 3401 Allen Parkway				
Suite 100				
Expenditure from corporate funds	Houston, TX 77019			
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 Image: Check if Austin, TX, officeholder living expense Food/Beverage Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Food/Beverage				
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
01/11/2023	Doyle LLP			
Amount (\$)	Payee address; City; State; Zip Code			
\$84.42	3401 Allen Parkway			
	Suite 100			
Expenditure from corporate funds	Houston, TX 77019			
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees 			
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	Even Fees Food - Gift/A Committee Legal	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense		Trans Trave Trave	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: 12/23 Rpt: 63/74		emocratic Lawyers' A	ssociation	Inc.	000	55728	
4 Date	5 Payee name						
01/11/2023	Doyle LLP						
6 Amount (\$)	7 Payee address;	City; State	e; Zip Cod	e			
\$1,081.92	3401 Allen Park	way					
	Suite 100						
Expenditure from corporate funds	Houston, TX 77	019					
· ·							
8 PURPOSE OF		egories listed at the top of this so	chedule)	b) Description			
EXPENDITURE	Event Expense			Check if travel			olete Schedule T.
				Event Expens			expense
					505		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeho	lder name	Office soug	ht		Office he	ld
Date	Payee name						
04/05/2023	Doyle LLP						
Amount (\$)	Payee address;	City; State	e; Zip Cod	e			
\$340.34	3401 Allen Park		o, <u>Lip</u> oou	0			
ψ540.54		way					
Expenditure from	Suite 100						
corporate funds	Houston, TX 77	019					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Expenses							
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeho	lder name	Office soug	ht	(Office he	ld
Data							
Date 01/31/2023	Payee name Frost Bank						
		Citra		-			
Amount (\$)	Payee address;	City; State	e; Zip Cod	e			
\$5.00	PO Box 1600						
Expenditure from corporate funds	San Antonio, T>	(78296					
PURPOSE	(a) Category (See Cat	egories listed at the top of this sc	chedule)	b) Description			
OF	Fees			Check if travel	outside of T	exas. Comp	blete Schedule T.
EXPENDITURE				Check if Austin	, TX, officeh	older living	expense
				Fees			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeho	lder name	Office soug	ht	(Office he	ld

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Sch: 13/23 Rpt: 64/74 Harris County Democratic Lawyers' Association Inc. 00055728 4 Date 5 Payee name 02/28/2023 Frost Bank 6 Amount (\$) 7 Payee address; City; State; Zip Code \$5.00 PO Box 1600 Expenditure from San Antonio, TX 78296 corporate funds PURPOSE 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held 9 expenditure to benefit C/OH Date Payee name 03/31/2023 Frost Bank Amount (\$) Payee address; City; State; Zip Code \$5.00 PO Box 1600 Expenditure from San Antonio, TX 78296 corporate funds PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees EXPENDITURE Check if Austin, TX, officeholder living expense Fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/30/2023 Frost Bank Amount (\$) Payee address; City; State; Zip Code \$5.00 PO Box 1600 Expenditure from corporate funds San Antonio, TX 78296 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees EXPENDITURE Check if Austin, TX, officeholder living expense Fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Sch: 14/23 Rpt: 65/74 Harris County Democratic Lawyers' Association Inc. 00055728 4 Date 5 Payee name 05/31/2023 Frost Bank 6 Amount (\$) 7 Payee address; City; State; Zip Code \$5.00 PO Box 1600 Expenditure from San Antonio, TX 78296 corporate funds PURPOSE 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held 9 expenditure to benefit C/OH Date Payee name 06/30/2023 Frost Bank Amount (\$) Payee address; City; State; Zip Code \$5.00 PO Box 1600 Expenditure from San Antonio, TX 78296 corporate funds PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees EXPENDITURE Check if Austin, TX, officeholder living expense Fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/03/2023 Karen Lee & Company Amount (\$) Payee address: City: State; Zip Code \$2,500.00 14003 Queensbury Lane Expenditure from Houston, TX 77079 corporate funds PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Consulting Expense Check if travel outside of Texas. Complete Schedule T. EXPENDITURE Check if Austin, TX, officeholder living expense Consultant Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Sch: 15/23 Rpt: 66/74 Harris County Democratic Lawyers' Association Inc. 00055728 4 Date 5 Payee name 05/18/2023 Karen Lee & Company 6 Amount (\$) Payee address; City; State; Zip Code 7 \$1,000.00 14003 Queensbury Lane Expenditure from Houston, TX 77079 corporate funds PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Consultant Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/04/2023 Neon One Amount (\$) Payee address; City; State; Zip Code \$3.74 4545 N Ravenswood Ave Floor 2 Expenditure from Chicago, IL 60640 corporate funds PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees EXPENDITURE Check if Austin, TX, officeholder living expense Fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/10/2023 Neon One Amount (\$) Payee address: City: State; Zip Code \$20.68 4545 N Ravenswood Ave Floor 2 Expenditure from corporate funds Chicago, IL 60640 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees EXPENDITURE Check if Austin, TX, officeholder living expense Fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 16/23 Rpt: 67/74	Harris County Democratic Lawyers' Association Inc. 00055728	
4 Date	5 Payee name	
01/18/2023	Neon One	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$29.09	4545 N Ravenswood Ave	
	Floor 2	
Expenditure from corporate funds	Chicago, IL 60640	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense Fees	
	rees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held	
Date	Pavee name	
01/24/2023	Neon One	
Amount (\$)	Payee address; City; State; Zip Code	
\$8.49	4545 N Ravenswood Ave	
	Floor 2	
Expenditure from corporate funds	Chicago, IL 60640	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees 	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
01/31/2023	Neon One	
Amount (\$)	Payee address; City; State; Zip Code	
\$19.17	4545 N Ravenswood Ave	
	Floor 2	
Expenditure from corporate funds	Chicago, IL 60640	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees 	
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 I Candidate/Officeholder/Politie Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 17/23 Rpt: 68/74	Harris County Democratic Lawyers' Association Inc. 00055728	
4 Date	5 Payee name	
02/07/2023	Neon One	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$12.55	4545 N Ravenswood Ave	
	Floor 2	
Expenditure from corporate funds	Chicago, IL 60640	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H	
Date	Payee name	
02/14/2023	Neon One	
Amount (\$)	Payee address; City; State; Zip Code	
\$38.53	4545 N Ravenswood Ave	
	Floor 2	
Expenditure from corporate funds	Chicago, IL 60640	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees 	
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H	
Date	Payee name	
02/22/2023	Neon One	
Amount (\$)	Payee address; City; State; Zip Code	
\$7.21	4545 N Ravenswood Ave	
	Floor 2	
Expenditure from corporate funds	Chicago, IL 60640	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees 	
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H	

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/Reimb Fees Office Overhead/Rental B Food/Beverage Expense Polling Expense - Gitt/Awards/Memorials Expense Printing Expense	ursement Solicitation/Fundraising Expense Expense Transportation Equipment & Related Expense Travel in District Travel Out of District t Labor OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 18/23 Rpt: 69/74	Harris County Democratic Lawyers' Association Inc.	00055728
4 Date	5 Payee name	
02/28/2023	Neon One	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$8.89	4545 N Ravenswood Ave	
	Floor 2	
Expenditure from corporate funds	Chicago, IL 60640	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	iption
OF EXPENDITURE	Fees	eck if travel outside of Texas. Complete Schedule T. eck 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	
03/07/2023	Neon One	
Amount (\$)	Payee address; City; State; Zip Code	
\$24.05	4545 N Ravenswood Ave	
Expenditure from corporate funds	Floor 2 Chicago, IL 60640	
PURPOSE OF EXPENDITURE		iption eck if travel outside of Texas. Complete Schedule T. eck 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	
03/21/2023	Neon One	
Amount (\$)	Payee address; City; State; Zip Code	
\$5.82	4545 N Ravenswood Ave	
	Floor 2	
Expenditure from corporate funds	Chicago, IL 60640	
PURPOSE OF EXPENDITURE		iption eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
Tatal sagan Cabadula E1;		· · · · · ·	Ethics Commission Eilore)
1 Total pages Schedule F1:			Filer ID (Ethics Commission Filers)
Sch: 19/23 Rpt: 70/74	Harris County Democratic Lawyers' Ass	ociation Inc.	00055728
4 Date	5 Payee name		
03/28/2023	Neon One		
6 Amount (\$)	7 Payee address; City; State;	Zip Code	
		Zip Coue	
\$9.17	4545 N Ravenswood Ave		
Evpondituro from	Floor 2		
Expenditure from corporate funds	Chicago, IL 60640		
8 PURPOSE	-	(b) Description	
0 PURPOSE	(a) Category (See Categories listed at the top of this sche		tside of Texas. Complete Schedule T.
EXPENDITURE	Fees		X, officeholder living expense
		Fees	A, oncentitier inving expense
		LEE2	
9 Complete ONLY if direct		ffice sought	Office held
expenditure to benefit C/OI	H		
Data	Deversion		
Date	Payee name		
04/04/2023	Neon One		
Amount (\$)	Payee address; City; State;	Zip Code	
\$8.58	4545 N Ravenswood Ave		
Expenditure from	Floor 2		
corporate funds	Chicago, IL 60640		
PURPOSE	(a) Category (See Categories listed at the top of this sche	dule) (b) Description	
OF	Fees	,	tside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, T	X, officeholder living expense
		Fees	
Complete ONLY if direct	Candidate/Officeholder name O	ffice sought	Office held
expenditure to benefit C/OI		nice sought	Once held
Date	Payee name		
04/11/2023	Neon One		
Amount (\$)	Payee address; City; State;	Zip Code	
.,			
\$2.52	4545 N Ravenswood Ave		
Evpanditura from	Floor 2		
Expenditure from corporate funds	Chicago, IL 60640		
PURPOSE		(b) Description	
OF	(a) Category (See Categories listed at the top of this sche		tside of Texas. Complete Schedule T.
EXPENDITURE	Fees		X, officeholder living expense
		Fees	
Complete ONLY if direct		ffice sought	Office held
expenditure to benefit C/OI	Н		

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ove Food/Beverage Expense Polling Ex Gift/Awards/Memorials Expense Printing E	, xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)
Sch: 20/23 Rpt: 71/74	Harris County Democratic Lawyers' Association		00055728
4 Date 04/18/2023	5 Payee name Neon One		
6 Amount (\$) \$26.08 Expenditure from corporate funds	 Payee address; City; State; Zip Co 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 	de	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		utside of Texas. Complete Schedule T. TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght	Office held
Date	Payee name		
04/25/2023	Neon One		
Amount (\$) \$3.84	Payee address; City; State; Zip Co 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	de	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		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 sou H	ght	Office held
Date	Payee name		
05/02/2023	Neon One		
Amount (\$) \$16.46 Expenditure from corporate funds	Payee address; City; State; Zip Co 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	de	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		utside of Texas. Complete Schedule T. TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght	Office held

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Offi Food/Beverage Expense Poll y - Gift/Awards/Memorials Expense Prin	n Repayment/Reimbursement ce Overhead/Rental Expense ng Expense ting Expense ries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
4 Total pages Schodulo E1:			Filer ID (Ethics Commission Filers)
1 Total pages Schedule F1:			, , ,
Sch: 21/23 Rpt: 72/74	Harris County Democratic Lawyers' Associ	ation Inc.	00055728
4 Date	5 Payee name		
05/09/2023	Neon One		
		O-de	
6 Amount (\$)	7 Payee address; City; State; Zip	Code	
\$37.31	4545 N Ravenswood Ave		
	Floor 2		
Expenditure from corporate funds	Chicago, IL 60640		
		1	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)		
EXPENDITURE	Fees		side of Texas. Complete Schedule T.
			X, officeholder living expense
		Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF		sought	Office held
Date	Payee name		
05/16/2023	Neon One		
Amount (\$)	Payee address; City; State; Zij	o Code	
\$15.40	4545 N Ravenswood Ave		
	Floor 2		
Expenditure from	Chicago, IL 60640		
Corporate funds			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)		
OF EXPENDITURE	Fees		side of Texas. Complete Schedule T.
			X, officeholder living expense
		Fees	
Complete ONLY if direct	Candidate/Officeholder name Office	sought	Office held
expenditure to benefit C/OF		0003	
Date	Payee name		
05/23/2023	Neon One		
Amount (\$)	Payee address; City; State; Zij	Code	
.,			
\$11.81	4545 N Ravenswood Ave		
	Floor 2		
Expenditure from corporate funds	Chicago, IL 60640		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)		it (There consider Octobule T
EXPENDITURE	Fees		side of Texas. Complete Schedule T.
			X, officeholder living expense
		Fees	
Complete ONLY if direct	Candidate/Officeholder name Office	sought	Office held
expenditure to benefit C/OI	Н	C C	

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 22/23 Rpt: 73/74	Harris County Democratic Lawyers' Association Inc. 00055728	
4 Date	5 Payee name	
05/31/2023	Neon One	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$15.16	4545 N Ravenswood Ave	
	Floor 2	
Expenditure from corporate funds	Chicago, IL 60640	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
06/06/2023	Neon One	
Amount (\$)	Payee address; City; State; Zip Code	
\$7.20	4545 N Ravenswood Ave	
Expenditure from corporate funds	Floor 2 Chicago, IL 60640	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees 	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
06/13/2023	Neon One	
Amount (\$)	Payee address; City; State; Zip Code	
\$26.80	4545 N Ravenswood Ave	
Evponditure from	Floor 2	
Expenditure from corporate funds	Chicago, IL 60640	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees 	
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 B Candidate/Officeholder/Politic Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 23/23 Rpt: 74/74	Harris County Democratic Lawyers' Association Inc. 00055728	
4 Date	5 Payee name	
06/21/2023	Neon One	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$19.60	4545 N Ravenswood Ave	
Expenditure from	Floor 2	
corporate funds	Chicago, IL 60640	
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees 	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	I Candidate/Officeholder name Office sought Office held H	
Date	Payee name	
06/27/2023	Neon One	
Amount (\$)	Payee address; City; State; Zip Code	
\$76.99	4545 N Ravenswood Ave	
Expenditure from corporate funds	Floor 2 Chicago, IL 60640	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees 	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
Date	Payee name	
01/31/2023	Riverside Media	
Amount (\$)	Payee address; City; State; Zip Code	
\$450.00	2616 S Loop W # 520	
Expenditure from corporate funds	Houston, TX 77054	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Expenses 	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	