



# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Harris County Democratic Lawyers' Association Inc.	<b>13 Filer ID</b> (Ethics Commission Filers) 00055728
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 15,080.96
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 21,975.64
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 10,794.56
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00

**16 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Dwayne Simpson  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

**SUBTOTALS - GPAC****FORM GPAC**  
**COVER SHEET PG 3**  
3 of 74

<b>17 COMMITTEE NAME</b> Harris County Democratic Lawyers' Association Inc.		<b>18 Filer ID</b> (Ethics Commission Filers) 00055728
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 15,080.96
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 21,975.64
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/48 Rpt: 4/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 04/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adkison-Brown, Denise <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77004	<b>7</b> Amount of Contribution (\$)  \$75.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 04/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adkison-Brown, Denise <hr/> Contributor address; City; State; Zip Code  Houston, TX 77004	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aiyer, Jay <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allen, Stacy <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arney, Lance <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/48 Rpt: 5/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 01/31/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arney, Lance ..... <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002	<b>7</b> Amount of Contribution (\$) \$70.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arney, Lance ..... Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arney, Lance ..... Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arney, Lance ..... Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arney, Lance ..... Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/48 Rpt: 6/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 06/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arnold, George <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77056	<b>7</b> Amount of Contribution (\$)  \$75.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arnold, George <hr/> Contributor address; City; State; Zip Code  Houston, TX 77056	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Avery, Jeffrey <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ayala, Miryea <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ayala, Miryea <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/48 Rpt: 7/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 03/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bailey, Nancy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77019	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bailey, Nancy <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bailey, Nancy <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bailey, Nancy <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baldonado, Gener <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 5/48 Rpt: 8/74
2 FILER NAME Harris County Democratic Lawyers' Association Inc.		3 Filer ID (Ethics Commission Filers) 00055728
4 Date 01/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barchas, Sarah	7 Amount of Contribution (\$)  \$75.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77019	
8 Principal occupation / Job title (See Instructions) Non-Attorney		9 Employer (See Instructions)
Date 01/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barrett, Kenneth	Amount of Contribution (\$)  \$35.00
	Contributor address; City; State; Zip Code  Houston, TX 77254	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barron, Patrice	Amount of Contribution (\$)  \$75.00
	Contributor address; City; State; Zip Code  Houston, TX 77266	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bauer, Joshua	Amount of Contribution (\$)  \$35.00
	Contributor address; City; State; Zip Code  Houston, TX 77027	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Behrman, John	Amount of Contribution (\$)  \$35.00
	Contributor address; City; State; Zip Code  Houston, TX 77006	
Principal occupation / Job title (See Instructions) Non-Attorney		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/48 Rpt: 9/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 05/16/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benitez, Purvi <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77073	<b>7</b> Amount of Contribution (\$)  \$75.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bennett, Robert <hr/> Contributor address; City; State; Zip Code  Houston, TX 77030	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bertini, Christopher <hr/> Contributor address; City; State; Zip Code  Bellaire, TX 77401	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Birnberg, Gerald <hr/> Contributor address; City; State; Zip Code  Houston, TX 77024	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bradford, Clarence <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Advisor		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/48 Rpt: 10/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 06/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brain, Allan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77027	<b>7</b> Amount of Contribution (\$)  \$75.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brain, Allan <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Braun, Stephen <hr/> Contributor address; City; State; Zip Code  Houston, TX 77008	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brockway, Emma <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown, Denise <hr/> Contributor address; City; State; Zip Code  Houston, TX 77004	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/48 Rpt: 11/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 01/24/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown, Denise <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77004	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown, Porscha <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brown, Sandra <hr/> Contributor address; City; State; Zip Code  Bellaire, TX 77401	Amount of Contribution (\$)  \$70.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brownfeld, Gail <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burchett, Lynda <hr/> Contributor address; City; State; Zip Code  Houston, TX 77070	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/48 Rpt: 12/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 03/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burchett, Lynda	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77070		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burchett, Lynda	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77070		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burchett, Lynda	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77070		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burchett, Lynda	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77070		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burgess, Marilyn	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/48 Rpt: 13/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 06/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Caballero, Deborah	<b>7</b> Amount of Contribution (\$) \$75.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77266		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Calabrese, Tracy	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77001		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Calabrese, Tracy	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77001		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Calnan, Cornelius	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77005		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Calnan, Cornelius	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77005		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/48 Rpt: 14/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 02/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Calnan, Cornelius <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77005	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Calnan, Cornelius <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carter, Eric <hr/> Contributor address; City; State; Zip Code  Bellaire, TX 77401	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chan, Jessica <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chauvin, Suzanne <hr/> Contributor address; City; State; Zip Code  Houston, TX 77001	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/48 Rpt: 15/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 06/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cofield, Brandon <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77004	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 01/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cohen, Murry <hr/> Contributor address; City; State; Zip Code  Houston, TX 77030	Amount of Contribution (\$)  \$70.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cohen, Roberta <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$70.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Colon, Edgar <hr/> Contributor address; City; State; Zip Code  Houston, TX 77007	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Condara, Christie <hr/> Contributor address; City; State; Zip Code  Houston, TX 77077	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/48 Rpt: 16/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 06/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cornelio, Natalia	<b>7</b> Amount of Contribution (\$)  \$75.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cornelio, Natalia	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cox, Jason	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Crain, Stephen	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Croffie, Brandi	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77056		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/48 Rpt: 17/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 04/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cryer, Linda <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77098	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cryer, Linda <hr/> Contributor address; City; State; Zip Code  Houston, TX 77098	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cryer, Linda <hr/> Contributor address; City; State; Zip Code  Houston, TX 77098	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dang, Kimberly <hr/> Contributor address; City; State; Zip Code  Houston, TX 77098	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dang, Kimberly <hr/> Contributor address; City; State; Zip Code  Houston, TX 77098	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/48 Rpt: 19/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 05/02/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dougherty, Judy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77007	<b>7</b> Amount of Contribution (\$)  \$70.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Doyle, Michael <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Doyle, Michael <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$70.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Doyle, Michael <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Doyle, Michael <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/48 Rpt: 20/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 02/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Doyle, Michael	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77019		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Doyle, Michael	Amount of Contribution (\$)  \$105.00
Contributor address; City; State; Zip Code  Houston, TX 77019		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Doyle, Michael	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77019		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dozier, Angellia	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Court Manager		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Driscoll, Victor	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77005		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/48 Rpt: 21/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 02/22/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Driscoll, Victor <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77005	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duble, Steven <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Duble, Steven <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$70.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Edwards, Amanda <hr/> Contributor address; City; State; Zip Code  Houston, TX 77288	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Engelhart, Michael <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/48 Rpt: 22/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 06/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ericksen, Joanne	<b>7</b> Amount of Contribution (\$)  \$75.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77063		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Faulkner, Velda	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77042		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Feldman, Cris	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77098		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Feldman, Cristen	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77098		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flood Nugent, Mary	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Benefits Manager		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/48 Rpt: 23/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 03/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garza, Madeline	<b>7</b> Amount of Contribution (\$) \$35.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77019		
<b>8</b> Principal occupation / Job title (See Instructions) Student		<b>9</b> Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Geretz, Elizabeth	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77020		
Principal occupation / Job title (See Instructions) Election Judge		Employer (See Instructions)
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gomez, Michael	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Guice, Ashley M	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Guttman, Alan	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77096		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/48 Rpt: 24/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 04/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Guttman, Alan	<b>7</b> Amount of Contribution (\$) \$35.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77096		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrison, Ronnie	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrison, Ronnie	Amount of Contribution (\$) \$70.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hartman, Robin	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77008		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hartman, Robin	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77008		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/48 Rpt: 25/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 05/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hartman, Robin	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77008		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Higgins, Sean	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77046		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hightower, Richard	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Homs, Sammy	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Houston, TX 77046		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hopkins, Randall	Amount of Contribution (\$)  \$540.96
Contributor address; City; State; Zip Code  Portland, OR 97212		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/48 Rpt: 26/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 02/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Horwitz, Noah	<b>7</b> Amount of Contribution (\$) \$250.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Horwitz, Noah	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hunter, Charles	Amount of Contribution (\$) \$140.00
Contributor address; City; State; Zip Code  Houston, TX 77027		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Isaak, David	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jefferson, Dwight	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/48 Rpt: 27/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 02/22/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Chase ..... <b>6</b> Contributor address; City; State; Zip Code  Humble, TX 77346	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Henry ..... Contributor address; City; State; Zip Code  Houston, TX 77077	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kallinen, Randall ..... Contributor address; City; State; Zip Code  Houston, TX 77012	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kennedy, Mary ..... Contributor address; City; State; Zip Code  Houston, TX 77007	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kennedy, Mary ..... Contributor address; City; State; Zip Code  Houston, TX 77007	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/48 Rpt: 28/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 05/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) King, Vivian <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) King, Vivian <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Knauth, Tonya <hr/> Contributor address; City; State; Zip Code  Houston, TX 77008	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kretzer, Seth <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Leisten, Denise <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/48 Rpt: 30/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 01/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lucido, Rita <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77019	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 03/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lucido, Rita <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lucido, Rita <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maines, William <hr/> Contributor address; City; State; Zip Code  Houston, TX 77056	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Manji, Abel <hr/> Contributor address; City; State; Zip Code  Sugar Land, TX 77479	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/48 Rpt: 32/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 06/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Michel, Arturo	<b>7</b> Amount of Contribution (\$)  \$75.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Michel, Arturo	Amount of Contribution (\$)  \$70.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Middleton, Kanika	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77073		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miles, Melanie	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77025		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Ross	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77034		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 30/48 Rpt: 33/74
2 FILER NAME Harris County Democratic Lawyers' Association Inc.		3 Filer ID (Ethics Commission Filers) 00055728
4 Date 05/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mitcham, David	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77002	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mitcham, David	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code  Houston, TX 77002	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mladenka-Fowler, Beatrice	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code  Houston, TX 77008	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Montemayor, Melissa	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code  Houston, TX 77292	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Montemayor, Melissa	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Houston, TX 77292	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/48 Rpt: 34/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 06/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morgan, Monica <hr/> <b>6</b> Contributor address; City; State; Zip Code  Pearland, TX 77581	<b>7</b> Amount of Contribution (\$)  \$75.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 01/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moser, Bertrand <hr/> Contributor address; City; State; Zip Code  Houston, TX 77008	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mostyn, Amber <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Muessig, William <hr/> Contributor address; City; State; Zip Code  Baytown, TX 77521	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mullin, Michele <hr/> Contributor address; City; State; Zip Code  Houston, TX 77098	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/48 Rpt: 35/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 02/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mullin, Michele <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77098	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mullin, Michele <hr/> Contributor address; City; State; Zip Code  Houston, TX 77098	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mytelka, Andrew <hr/> Contributor address; City; State; Zip Code  Galveston, TX 77550	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mytelka, Andrew <hr/> Contributor address; City; State; Zip Code  Galveston, TX 77550	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nechman, John <hr/> Contributor address; City; State; Zip Code  Houston, TX 77057	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/48 Rpt: 36/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 03/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nechman, John <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77057	<b>7</b> Amount of Contribution (\$)  \$70.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nichols, Michael <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Norwood, Greg <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Non-Attorney		Employer (See Instructions)
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) O'Rourke, Terry <hr/> Contributor address; City; State; Zip Code  Houston, TX 77025	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) OHarra, Catherine <hr/> Contributor address; City; State; Zip Code  Bellaire, TX 77401	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/48 Rpt: 37/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 05/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Olive, Kenneth	<b>7</b> Amount of Contribution (\$)  \$75.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002		
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions)
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Olive, Kenneth	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Olivo, Dora	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code  Richmond, TX 77469		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Padley, Drew	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patronella, David	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77206		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/48 Rpt: 38/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 02/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patronella, David <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patronella, David <hr/> Contributor address; City; State; Zip Code  Houston, TX 77206	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pedersen, Nicole <hr/> Contributor address; City; State; Zip Code  Houston, TX 77008	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pesikoff, Bette <hr/> Contributor address; City; State; Zip Code  Houston, TX 77098	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Peterson, Denise <hr/> Contributor address; City; State; Zip Code  Houston, TX 77003	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Mediator		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/48 Rpt: 39/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 02/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Piggee, Kennard <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77008	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Prim, April <hr/> Contributor address; City; State; Zip Code  The Woodlands, TX 77380	Amount of Contribution (\$)  \$70.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pyke, Cody <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Radnofsky, Barbara <hr/> Contributor address; City; State; Zip Code  Houston, TX 77339	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramirez, Annette <hr/> Contributor address; City; State; Zip Code  Houston, TX 77073	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 37/48 Rpt: 40/74
2 FILER NAME Harris County Democratic Lawyers' Association Inc.		3 Filer ID (Ethics Commission Filers) 00055728
4 Date 02/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramirez, Annette	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77073	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramsey, Judith	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  Houston, TX 77002	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reagin, Shawna	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  Houston, TX 77002	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Redford, David	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  Houston, TX 77027	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Riley, Timothy	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code  Houston, TX 77007	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 38/48 Rpt: 41/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 05/16/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robbins, Tina Zahabi	<b>7</b> Amount of Contribution (\$) \$75.00
<b>6</b> Contributor address; City; State; Zip Code  Pearland, TX 77581		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Cawlyn	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Jane	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77010		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roehm, Susan	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code  Austin, TX 78746		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roth, Andrea	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77007		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 39/48 Rpt: 42/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 02/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rutter, Kent	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77010		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sandill- Other, Ravi	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sepolio, Donald	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77006		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shanklin, Paul	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shaw Campaign Shaw, Penny	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Houston, TX 77292		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 40/48 Rpt: 43/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 06/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shelnut, Katie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77019	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Non-Attorney		<b>9</b> Employer (See Instructions)
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shepard, E Kay <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Non-Attorney		Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shepard, E Kay <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Non-Attorney		Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simoneaux, Jerry <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simoneaux, Jerry <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 41/48 Rpt: 44/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 03/28/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Singleton, Eric	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Singleton, Eric	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Singleton, Eric	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Singleton, Eric	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Small, William	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77056		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 42/48 Rpt: 45/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 02/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Kingsley	<b>7</b> Amount of Contribution (\$) \$105.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77010		
<b>8</b> Principal occupation / Job title (See Instructions) Marketing Director		<b>9</b> Employer (See Instructions)
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Melissa	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code  Humble, TX 77346		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Snively, Judith	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Snow, Joellen	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77008		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Snow, Joellen	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77008		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 43/48 Rpt: 46/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 05/31/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spain, Charles	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spain, Charles	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stone, Nancy	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Sugar Land, TX 77479		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Svetlik, Frank	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77024		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Swafford, Robert	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Austin, TX 78704		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 44/48 Rpt: 47/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 05/16/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trachtenberg, Brian	<b>7</b> Amount of Contribution (\$)  \$105.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77006		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trachtenberg, Brian	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77006		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trachtenberg, Brian	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77006		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trachtenberg, Brian	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77006		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trachtenberg, Brian	Amount of Contribution (\$)  \$45.00
Contributor address; City; State; Zip Code  Houston, TX 77006		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 45/48 Rpt: 48/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 01/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vinson, Alia	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77027		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vonder Haar, Victoria	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77292		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vonder Haar, Victoria	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77292		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wallenstein, Joshua	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77077		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Walsh, Julia	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77027		
Principal occupation / Job title (See Instructions) Administrative Manager		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 46/48 Rpt: 49/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 03/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Walsh, Julia	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77027		
<b>8</b> Principal occupation / Job title (See Instructions) Administrative Manager		<b>9</b> Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Walton, Larry	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77018		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wells, Clinton	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wells, Clinton	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 01/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wells, Clinton	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 47/48 Rpt: 50/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 06/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Kelcey	<b>7</b> Amount of Contribution (\$)  \$75.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78705		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 05/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Willms, David	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Principal occupation / Job title (See Instructions) Non-Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wils, Helen	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code  Houston, TX 77010		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wils, Helen	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Houston, TX 77010		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 05/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wils, Helen	Amount of Contribution (\$)  \$15.00
Contributor address; City; State; Zip Code  Houston, TX 77010		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 48/48 Rpt: 51/74
<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.		<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 02/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wisch, Steven <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77025	<b>7</b> Amount of Contribution (\$) \$75.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 03/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yates III, Sam <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Youngdahl, Sara <hr/> Contributor address; City; State; Zip Code  Houston, TX 77006	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zimmerer, Jerry <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/23 Rpt: 52/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 01/10/2023	<b>5</b> Payee name Blue Beam LLC	
<b>6</b> Amount (\$) \$800.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 10925 Wrenwood Manor  Houston, TX 77043	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/08/2023	Candidate/Officeholder name Blue Beam LLC	
Amount (\$) \$250.00  <input type="checkbox"/> Expenditure from corporate funds	Office sought 10925 Wrenwood Manor  Houston, TX 77043	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/05/2023	Candidate/Officeholder name Blue Beam LLC	
Amount (\$) \$250.00  <input type="checkbox"/> Expenditure from corporate funds	Office sought 10925 Wrenwood Manor  Houston, TX 77043	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/23 Rpt: 53/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 06/12/2023	<b>5</b> Payee name Blue Beam LLC	
<b>6</b> Amount (\$) \$585.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 10925 Wrenwood Manor  Houston, TX 77043	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/12/2023	Candidate/Officeholder name Cadillac Bar	
Amount (\$) \$1,155.53  <input type="checkbox"/> Expenditure from corporate funds	Office sought 1802 Shepherd  Houston, TX 77007	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expenses
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/13/2023	Candidate/Officeholder name Cadillac Bar	
Amount (\$) \$2,135.27  <input type="checkbox"/> Expenditure from corporate funds	Office sought 1802 Shepherd  Houston, TX 77007	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expenses
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/23 Rpt: 54/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 01/23/2023	<b>5</b> Payee name Cadillac Bar	
<b>6</b> Amount (\$) \$1,482.28  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1802 Shepherd  Houston, TX 77007	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expenses
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/01/2023	Candidate/Officeholder name Cadillac Bar	
Amount (\$) \$2,230.25  <input type="checkbox"/> Expenditure from corporate funds	Office sought 1802 Shepherd  Houston, TX 77007	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expenses
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/01/2023	Candidate/Officeholder name Cadillac Bar	
Amount (\$) \$60.44  <input type="checkbox"/> Expenditure from corporate funds	Office sought 1802 Shepherd  Houston, TX 77007	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expenses
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/01/2023	Candidate/Officeholder name Cadillac Bar	
Amount (\$) \$60.44  <input type="checkbox"/> Expenditure from corporate funds	Office sought 1802 Shepherd  Houston, TX 77007	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expenses
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/23 Rpt: 55/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 05/08/2023	<b>5</b> Payee name Cadillac Bar	
<b>6</b> Amount (\$) \$1,155.53  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1802 Shepherd  Houston, TX 77007	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expenses
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/06/2023	Payee name Carter and Hatcher	
Amount (\$) \$52.50  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 7447  Houston, TX 77248	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/27/2023	Payee name Carter and Hatcher	
Amount (\$) \$726.82  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 7447  Houston, TX 77248	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/23 Rpt: 56/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
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<b>4</b> Date 04/19/2023	<b>5</b> Payee name Carter and Hatcher
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<b>6</b> Amount (\$) \$52.50  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 7447  Houston, TX 77248
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/22/2023	Payee name Carter and Hatcher
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Amount (\$) \$70.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 7447  Houston, TX 77248
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/02/2023	Payee name Carter and Hatcher
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Amount (\$) \$91.10  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 7447  Houston, TX 77248
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/23 Rpt: 57/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
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<b>4</b> Date 03/15/2023	<b>5</b> Payee name Dang, Kimberly
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<b>6</b> Amount (\$) \$509.94  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 3355 West Alabama Suite 1220 Houston, TX 77098
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/Beverage
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/15/2023	Payee name Dang, Kimberly
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Amount (\$) \$983.39  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3355 West Alabama Suite 1220 Houston, TX 77098
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/Beverage
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/11/2023	Payee name Doyle LLP
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Amount (\$) \$142.69  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3401 Allen Parkway Suite 100 Houston, TX 77019
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/23 Rpt: 58/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 01/11/2023	<b>5</b> Payee name Doyle LLP	
<b>6</b> Amount (\$) \$142.69  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 3401 Allen Parkway Suite 100 Houston, TX 77019	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/05/2023	Payee name Doyle LLP	
Amount (\$) \$142.69  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3401 Allen Parkway Suite 100 Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/05/2023	Payee name Doyle LLP	
Amount (\$) \$142.69  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3401 Allen Parkway Suite 100 Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/23 Rpt: 59/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
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<b>4</b> Date 04/05/2023	<b>5</b> Payee name Doyle LLP
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<b>6</b> Amount (\$) \$142.69  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 3401 Allen Parkway Suite 100 Houston, TX 77019
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/05/2023	Payee name Doyle LLP
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Amount (\$) \$515.38  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3401 Allen Parkway Suite 100 Houston, TX 77019
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/11/2023	Payee name Doyle LLP
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Amount (\$) \$120.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3401 Allen Parkway Suite 100 Houston, TX 77019
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expenses
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/23 Rpt: 60/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
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<b>4</b> Date 01/11/2023	<b>5</b> Payee name Doyle LLP
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<b>6</b> Amount (\$) \$800.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 3401 Allen Parkway Suite 100 Houston, TX 77019
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expenses
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/05/2023	Payee name Doyle LLP
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Amount (\$) \$260.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3401 Allen Parkway Suite 100 Houston, TX 77019
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expenses
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/11/2023	Payee name Doyle LLP
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Amount (\$) \$217.87  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3401 Allen Parkway Suite 100 Houston, TX 77019
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/Beverage
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/23 Rpt: 61/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 01/11/2023	<b>5</b> Payee name Doyle LLP	
<b>6</b> Amount (\$) \$194.71  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 3401 Allen Parkway Suite 100 Houston, TX 77019	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/Beverage
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/11/2023	Payee name Doyle LLP	
Amount (\$) \$267.03  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3401 Allen Parkway Suite 100 Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/Beverage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/11/2023	Payee name Doyle LLP	
Amount (\$) \$80.63  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3401 Allen Parkway Suite 100 Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/Beverage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/23 Rpt: 62/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
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<b>4</b> Date 04/05/2023	<b>5</b> Payee name Doyle LLP
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<b>6</b> Amount (\$) \$28.36  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 3401 Allen Parkway Suite 100 Houston, TX 77019
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/Beverage
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/05/2023	Payee name Doyle LLP
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Amount (\$) \$245.84  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3401 Allen Parkway Suite 100 Houston, TX 77019
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/Beverage
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/11/2023	Payee name Doyle LLP
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Amount (\$) \$84.42  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3401 Allen Parkway Suite 100 Houston, TX 77019
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/23 Rpt: 63/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 01/11/2023	<b>5</b> Payee name Doyle LLP	
<b>6</b> Amount (\$) \$1,081.92  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 3401 Allen Parkway Suite 100 Houston, TX 77019	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expenses
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/05/2023	Payee name Doyle LLP	
Amount (\$) \$340.34  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3401 Allen Parkway Suite 100 Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expenses
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2023	Payee name Frost Bank	
Amount (\$) \$5.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1600  San Antonio, TX 78296	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/23 Rpt: 64/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 02/28/2023	<b>5</b> Payee name Frost Bank	
<b>6</b> Amount (\$) \$5.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1600  San Antonio, TX 78296	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/31/2023	Candidate/Officeholder name Frost Bank	
Amount (\$) \$5.00  <input type="checkbox"/> Expenditure from corporate funds	Office sought PO Box 1600  San Antonio, TX 78296	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/30/2023	Candidate/Officeholder name Frost Bank	
Amount (\$) \$5.00  <input type="checkbox"/> Expenditure from corporate funds	Office sought PO Box 1600  San Antonio, TX 78296	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 14/23 Rpt: 65/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 05/31/2023	<b>5</b> Payee name Frost Bank	
<b>6</b> Amount (\$) \$5.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1600  San Antonio, TX 78296	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2023	Payee name Frost Bank	
Amount (\$) \$5.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1600  San Antonio, TX 78296	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/03/2023	Payee name Karen Lee & Company	
Amount (\$) \$2,500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 14003 Queensbury Lane  Houston, TX 77079	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 15/23 Rpt: 66/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 05/18/2023	<b>5</b> Payee name Karen Lee & Company	
<b>6</b> Amount (\$) \$1,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 14003 Queensbury Lane  Houston, TX 77079	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/04/2023	Candidate/Officeholder name Neon One	
Amount (\$) \$3.74  <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Candidate/Officeholder name Office sought Office held		
Date 01/10/2023	Payee name Neon One	
Amount (\$) \$20.68  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Candidate/Officeholder name Office sought Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 16/23 Rpt: 67/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 01/18/2023	<b>5</b> Payee name Neon One	
<b>6</b> Amount (\$) \$29.09 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/24/2023	Payee name Neon One	
Amount (\$) \$8.49 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2023	Payee name Neon One	
Amount (\$) \$19.17 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 17/23 Rpt: 68/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 02/07/2023	<b>5</b> Payee name Neon One	
<b>6</b> Amount (\$) \$12.55 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 02/14/2023	Payee name Neon One	
Amount (\$) \$38.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 02/22/2023	Payee name Neon One	
Amount (\$) \$7.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 18/23 Rpt: 69/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 02/28/2023	<b>5</b> Payee name Neon One	
<b>6</b> Amount (\$) \$8.89 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/07/2023	Payee name Neon One	
Amount (\$) \$24.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/21/2023	Payee name Neon One	
Amount (\$) \$5.82 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 19/23 Rpt: 70/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 03/28/2023	<b>5</b> Payee name Neon One	
<b>6</b> Amount (\$) \$9.17 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/04/2023	Payee name Neon One	
Amount (\$) \$8.58 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/11/2023	Payee name Neon One	
Amount (\$) \$2.52 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 20/23 Rpt: 71/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 04/18/2023	<b>5</b> Payee name Neon One	
<b>6</b> Amount (\$) \$26.08  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/25/2023	Candidate/Officeholder name Neon One	
Amount (\$) \$3.84  <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Candidate/Officeholder name Office sought Office held		
Date 05/02/2023	Payee name Neon One	
Amount (\$) \$16.46  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Candidate/Officeholder name Office sought Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 21/23 Rpt: 72/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 05/09/2023	<b>5</b> Payee name Neon One	
<b>6</b> Amount (\$) \$37.31  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/16/2023	Payee name Neon One	
Amount (\$) \$15.40  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/23/2023	Payee name Neon One	
Amount (\$) \$11.81  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 22/23 Rpt: 73/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
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<b>4</b> Date 05/31/2023	<b>5</b> Payee name Neon One
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<b>6</b> Amount (\$) \$15.16  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/06/2023	Payee name Neon One
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Amount (\$) \$7.20  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/13/2023	Payee name Neon One
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Amount (\$) \$26.80  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 23/23 Rpt: 74/74	<b>2</b> FILER NAME Harris County Democratic Lawyers' Association Inc.	<b>3</b> Filer ID (Ethics Commission Filers) 00055728
<b>4</b> Date 06/21/2023	<b>5</b> Payee name Neon One	
<b>6</b> Amount (\$) \$19.60  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/27/2023	Payee name Neon One	
Amount (\$) \$76.99  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2023	Payee name Riverside Media	
Amount (\$) \$450.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2616 S Loop W # 520  Houston, TX 77054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expenses
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held