JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to c	omplete this form.	1 Filer ID (Ethics Commission 00069505	n Filers)	2 Total pages	filed: 13		
3 CANDIDATE /	MS / MRS / MR	FIRST		OFFICE USE ONLY				
OFFICEHOLDER	The Honorable	Amber N.		MI		USE UNL T		
NAME					Date Received			
					ELECTRONIC	CALLY FILED		
	NICKNAME	LAST		SUFFIX	12/18/2023			
		Givens-Davis						
4 CANDIDATE /	ADDRESS / PO BOX;	APT / SUITE #: CIT	Y:	ZIP CODE	Date Hand-delivered	or Date Postmarked		
OFFICEHOLDER	3824 Cedar Springs F		,					
MAILING ADDRESS	coll count opinige i				Receipt #	Amount		
Change of Address	Dallas, TX 75219				Date Processed			
					Date Imaged			
5 CAMPAIGN	MS / MRS / MR	FIRST			МІ			
TREASURER NAME	Ms.	Nicole						
	NICKNAME	LAST			SUFFIX			
		Knox						
6 CAMPAIGN	STREET ADDRESS (NC	PO BOX PLEASE):	APT / S	SUITE #; CITY;	S	TATE; ZIP CODE		
TREASURER	3131 McKinney Ave, S			,				
ADDRESS								
(Residence or Business)	Dallas TX 75204							
	Dallas, TX 75204							
7 CAMPAIGN	AREA CODE P	HONE NUMBER	EXTENSION					
TREASURER	(214) 740-9955							
PHONE								
8 REPORT								
TYPE	January 15	30th day before	election Ru	noff		ampaign treasurer		
					-	fficeholder only)		
	X July 15	8th day before		ceeded modified	Final Report (A	ttach C/OH-FR)		
9 PERIOD COVERED	,	ear		Month Day	Year			
COVERED	01/01/2023	11	IROUGH	06/30/202	3			
		I						
10 ELECTION	ELECTION DAT		-	ELECTION TYPE				
		ear F	rimary	Runoff	Other			
	11/08/2022		eneral	Special				
			· · · · · ·					
11 OFFICE	OFFICE HELD (if any)	I	1	2 OFFICE SOUGHT	(if known)			
	District Judge District	282 Dallas	-	District Judge Di				
		GO 1	O PAGE 2					
Forms provided by Te	exas Ethics Commission	www.et	hics.state.tx.us		Ve	rsion V3.5.1.f1b8c3f		

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 13

T

13 C / OH NAME	Givens-Davis, Ambe	N. (The Honorable)	14 Filer ID 00069505	(Ethics Commissio	on Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or politica These expenditures may have been ma d officeholders are required to report this	de without the candidate's or offi	ceholder's knowled	ge or
Additional Pages		COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURE	ER NAME		
		COMMITTEE CAMPAIGN TREASURE	RADDRESS		
16 CONTRIBUTION	1. TOTAL UNITEM	IZED POLITICAL CONTRIBUTIONS(07			
TOTALS		ES OF LOANS, OR CONTRIBUTIONS I		\$	0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES	S OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	\$	0.00		
	4. TOTAL POLIT	ICAL EXPENDITURES	\$	6,781.04	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS RIOD	OF THE LAST DAY OF THE	\$	949.39
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOP	PAL AMOUNT OF ALL OUTSTANDING	LOANS AS OF THE LAST DAY	\$	0.00
17 AFFIDAVIT			nder penalty of perjury, that the a I includes all information required tion Code.		
		The	e Honorable Amber N. Givens	s-Davis	
			Signature of Candidate or Officeh	older	
AFFIX NO	TARY STAMP / SEAL AB	OVE			
		aid ertify which, witness my hand and seal o		day	у
Signature of offic	cer administering oath	Printed name of officer administer	ing oath Title of offic	er administering oa	ıth
Forms provided by Te	exas Ethics Commission	www.ethics.state.tx.us		Version V3.5.1	L.f1b8c3f1

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

3 of 13

	I8 FILER NAME19 Filer IDGivens-Davis, Amber N. (The Honorable)00069505										
20 SCHEDUL	E SUBTOTALS		SUBTOTAL AMOUNT								
NAME OF	SCHEDULE		SUBTUTAL AWOUNT								
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$ 0.00								
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$									
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$								
4. X	SCHEDULE E(J): LOANS (JUDICIAL)		\$ 0.00								
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 4,426.02								
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$								
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$								
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$								
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 2,355.02								
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$								
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$								
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$								

	LOANS (J	schedule E	E(J)						
	The Instructio	n Guide explains how to complete this	; form.		1 Total pages Schedule E(J): Sch: 1/1 Rpt: 4/13				
2	FILER NAME Givens-Davis, Ar	3 Filer ID 000695	(Ethics Commission F 505	-ilers)					
4	TOTAL OF UN	\$	0.00						
5	Date of loan	7 Name of lender out-of-state I	PAC (ID#:)	9 Loan Amount (\$)				
6	Is lender a financial institution?		10 Interest Rate						
					11 Maturity Date				
12	2 Lender's Principal	Occupation	13 Lender's Job Title	nder's Job Title					
14	Lender's Employer	/Law Firm	15 Law Firm of lender's spous	se (if any)					
16	3 If lender is child, la	w firm of parent(s) (if any)	·						
17	7 Description of Colla	ateral	18 Check if personal funds we	ere deposited	d into political account (See Instructions)				
19	GUARANTOR INFORMATION	20 Name of guarantor	•		22 Amount Guarantee	ed (\$)			
	not applicable	21 Guarantor address; City; State;	·						
23	3 Guarantor's Princip	pal Occupation	24 Guarantor's Job Title						
25	5 Guarantor's Emplo	yer/Law Firm	26 Law Firm of guarantor's spouse (if any)						
27	7 If guarantor is child	l, law firm of parent(s) (if any)	- -						

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		-	Office Overhead/Rental Expense Beverage Expense Polling Expense wards/Memorials Expense Printing Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 1/6 Rpt: 5/13		Givens-Davis, Amber N. (The Honorabl	le)			00069505
4	Date 02/23/2023		Payee name Bandan Koro African Drum and Dance	Ensemb	le		
6	Amount (\$) \$750.00		Payee address; City; State; 3630 Harry Hines Blvd Dallas, TX 75219	Zip Coo	le		
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Event Expense	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense ?erformance
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	ffice sou	ht		Office held
	Date		Payee name				
	03/01/2023		Bank of America				
	Amount (\$) \$16.00		Payee address; City; State; PO Box 29966	Zip Co	le		
			Phoenix, AZ 85038				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Accounting/Banking	edule)			ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	ffice sou	ht		Office held
	Date		Payee name				
	04/03/2023		Bank of America				
	Amount (\$) \$16.00		Payee address; City; State; PO Box 29966	Zip Co	le		
			Phoenix, AZ 85038				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Accounting/Banking	dule)			ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	ffice sou	ht		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME		-	3	Filer ID (Ethics Commission Filers)		
	Sch: 2/6 Rpt: 6/13		Givens-Davis, Amber N. (The Honoral	ole)			00069505		
4	Date	5	Payee name						
	05/01/2023		Bank of America						
6	Amount (\$)	7	Payee address; City; State	; Zip Co	de				
	\$16.00		PO Box 29966						
			Phoenix, AZ 85038						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	vedule)	(b) Description				
	OF EXPENDITURE		Accounting/Banking	iouulo)		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITORE					, TX	, officeholder living expense		
					service fee				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght		Office held		
	Date		Payee name						
	06/01/2023		Bank of America						
	Amount (\$)		Payee address; City; State	; Zip Co	de				
	\$16.00		PO Box 29966						
			Phoenix, AZ 85038						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Accounting/Banking	nedule)			ide of Texas. Complete Schedule T. , officeholder living expense		
					service fee				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name (Office sou	ght	Office held			
	Date		Payee name						
	02/23/2023		By All Means Creations						
	Amount (\$)		Payee address; City; State	; Zip Co	de				
	\$300.00		6901A N. 9th Ave #1041						
			Pensacola , FL 32504						
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description				
	OF EXPENDITURE		Event Expense				ide of Texas. Complete Schedule T. , officeholder living expense		
					videography	, 17,			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp nmittee Legal Services The Instruction Guide		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2		•		•	3	Filer ID (Ethics Commission Filers)
-	Sch: 3/6 Rpt: 7/13		Givens-Davis, Amber N. (The	Honorab	ole)		ľ	00069505
4	Date 02/23/2023	5	Payee name DJ Tazia					
6	Amount (\$) \$300.00	7	Payee address; City; 527 Roundtop Blvd Duncanville, TX 75116	State;	; Zip Co	de		
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the te Event Expense	op of this sch	iedule)		n, TX,	side of Texas. Complete Schedule T. K, officeholder living expense t
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office held
	Date		Payee name					
	02/23/2023		Delightful Sweets					
	Amount (\$)		Payee address; City;	State	; Zip Co	de		
	\$304.00		324 E. Belt Line Rd. Ste. 206 Desoto, TX 75115					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the tr Event Expense	op of this sch	iedule)		n, TX	side of Texas. Complete Schedule T. K, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office held
	Date		Payee name					
	02/23/2023		DorJaba Productions					
	Amount (\$) \$250.00		Payee address; City; 18081 Midway Rd. #2322 Dallas, TX 75287	State;	; Zip Co	de		
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the te Event Expense	op of this sch	nedule)		n, TX	side of Texas. Complete Schedule T. K, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name	(Office sou	ght		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME 3 Fil				Filer ID (Ethics Commission Filers)
	Sch: 4/6 Rpt: 8/13		Givens-Davis, Amber N. (The Honorab	le)			00069505
4	Date	5	Payee name				
	02/21/2023		Givens, Amber				
6	Amount (\$)	7		Zip Co	de		
	\$1,437.02		3824 Cedar Springs Rd				
			Ste. 253				
			Dallas, TX 75219				
8	PURPOSE	(a)	Category (See Categories listed at the top of this scho	edule)	(b) Description		
	OF EXPENDITURE		Loan Repayment/Reimbursement	,	Check if trave		side of Texas. Complete Schedule T.
	EXPENDITORE						K, officeholder living expense
					Balloon dec	or re	eimbursement
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held
	Date		Payee name				
	03/31/2023		Givens, Amber				
	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$93.00		3824 Cedar Springs Rd				
			Ste. 253				
			Dallas, TX 75219				
	PURPOSE	(a)	Category (See Categories listed at the top of this sch		(b) Description		
	OF	(,	Loan Repayment/Reimbursement	edule)		el outs	side of Texas. Complete Schedule T.
	EXPENDITURE						K, officeholder living expense
					website fee	rein	nbursement
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held
	Date		Payee name				
	02/06/2023		Givens, Amber				
	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$93.00		3824 Cedar Springs Rd	·			
			Ste. 253				
			Dallas, TX 75219				
	PURPOSE	(0)			(b) Description		
	OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description	el outs	side of Texas. Complete Schedule T.
	EXPENDITURE		Loan Repayment/Reimbursement				K, officeholder living expense
					website fee	rein	nbursement
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name C	Office sou	ght		Office held
-							

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Event Expense Fees Food/Beverage E) Gift/Awards/Memo Legal Services The Instruction		Office Ove Polling Ex Printing Ex Salaries/W	rhead/R pense pense ages/Co	Reimbursement Rental Expense ontract Labor e this form.		Travel in Distric Travel Out of D	Equipment & t strict	pense & Related Expense not listed above)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics	Commission Filers)
	Sch: 5/6 Rpt: 9/13		Givens-Dav	is, Amber N.	(The Honorat	ole)				00069505		
4	Date	5	Payee name									
	04/17/2023		Givens, Am	ber								
6	Amount (\$)	7	Payee addres	ss; City;	State	; Zip Co	de					
	\$360.00		3824 Cedar	Springs Rd								
			Ste. 253									
			Dallas, TX 7	'5219								
8	PURPOSE	(a)			l at the top of this sch		(b) D	escription				
	OF	,	Fees	e Categories listed	at the top of this sch	iedule)	(, D	Check if travel c	outsic	de of Texas. Cor	nplete Sche	dule T.
	EXPENDITURE		1 000				Ē	Check if Austin,	, тх,	officeholder livin	g expense	
							U	JPS box fee	reir	nbursemer	t	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	e (Office sou	ght			Office h	eld	
	Date		Payee name									
	02/24/2023		King, LaKer	Idra								
	Amount (\$)		Payee addres	s; City;	State	; Zip Co	de					
	\$120.00		1430 Drago	n St.								
			Ste. 19									
			Dallas, TX 7	'5207								
	PURPOSE	(a)			I at the top of this sch	adula)	(b) D	escription				
	OF		Event Expe		at the top of this sch	ieuuie)	Γ	Check if travel c	outsic	de of Texas. Cor	nplete Sche	dule T.
	EXPENDITURE						Ē	Check if Austin,	, TX,	officeholder livin	g expense	
							E	Event coordin	nato	or (day of)		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	e (Office sou	ght			Office h	eld	
	Date		Payee name									
	02/16/2023		RamWeb E	nterprises								
	Amount (\$)		Payee addres	s; City;	State	; Zip Co	de					
	\$55.00		350 Buckne	r Blvd								
			#171752									
			Dallas, TX 7	'5217								
	PURPOSE	(0)				1	<u>(h)</u> p					
	OF	(a)	Advertising		I at the top of this sch	iedule)	(0) D E	escription Check if travel o	outsio	de of Texas. Cor	nplete Sche	dule T.
	EXPENDITURE		Auventising	Expense			F	Check if Austin,				
							g	raphics				
	Complete <u>ONLY</u> if direct		Candidate/Offi	ceholder name	e (Office sou	ght			Office h	eld	
	expenditure to benefit C/OI											

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 6/6 Rpt: 10/13	2 FILER NAME Givens-Davis, Amber N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069505
4	Date 02/22/2023	5 Payee name Soul Hearted Catering	
6	Amount (\$) \$300.00	 Payee address; City; State; Zip Code 4925 Bonniview Rd Dallas, TX 75241 	
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ove Food/Beverage Expense Polling Ex Gift/Awards/Memorials Expense Printing Ex	ayment/Reinbursement Solicitation/Fundraising Expense rhead/Rental Expense Transportation Equipment & Related Expense pense Travel in District rpense Travel Out of District /ages/Contract Labor OTHER (enter a category not listed above)				
1	Total pages Schedule G: Sch: 1/3 Rpt: 11/13	2 FILER NAME Givens-Davis, Amber N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069505				
4	Date 01/03/2023	5 Payee name Nation Builder					
6	Amount (\$) \$93.00 X Reimbursement from political contributions intended	 7 Payee address; City; State; Zip Co 448 S. Hill St. Ste. 200 Los Angeles, CA 09913 	de				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense website fee				
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office sought Office held Office held							
	Date 02/03/2023	Payee name Nation Builder					
	Amount (\$) \$93.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip Co 448 S. Hill St. Ste. 200 Los Angeles, CA 09913	de				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense website fee				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
	Date 03/03/2023	Payee name Nation Builder					
	Amount (\$) \$93.00	Payee address;City;State; Zip Co448 S. Hill St. Ste. 200	de				
	X Reimbursement from political contributions intended	Los Angeles, CA 09913					
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Sc Advertising Expense Check if Austin, TX, officeholder living expense website fee					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District By - Gift/Awards/Memorials Expense Printing Expense Travel Out of District	ient & Related Expense			
1	Total pages Schedule G: Sch: 2/3 Rpt: 12/13	2 FILER NAME 3 Filer ID (Ethics 00069505 Givens-Davis, Amber N. (The Honorable) 00069505	Commission Filers)			
4	Date 04/03/2023	5 Payee name Nation Builder				
6	Amount (\$) \$93.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 0 448 S. Hill St. Ste. 200 Los Angeles, CA 09913				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Check if Austin, TX, office website fee	Texas. Complete Schedule T. holder living expense			
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office sought Office held Office held						
	Date	Payee name				
	05/03/2023	Nation Builder				
	Amount (\$) \$93.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 448 S. Hill St. Ste. 200 Los Angeles, CA 09913				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description Check if travel outside of The Check if Austin, TX, office Advertising Expense website fee	Texas. Complete Schedule T. holder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office	held			
	Date 06/05/2023	Payee name Nation Builder				
	Amount (\$) \$93.00	Payee address; City; State; Zip Code 0 448 S. Hill St. Ste. 200				
	Reimbursement from political contributions intended	Los Angeles, CA 09913				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description Check if travel outside of The Check if Austin, TX, office Advertising Expense Website fee	Texas. Complete Schedule T. holder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office	held			

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8 Event Expense Loan Repayment/Reir Fees Office Overhead/Rent Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contr The Instruction Guide explains how to complete th	Abursement Solicitation/Fundraising Expense al Expense Transportation Equipment & Related Expense Travel in District Travel Out of District act Labor OTHER (enter a category not listed above)
1	Total pages Schedule G: Sch: 3/3 Rpt: 13/13	2 FILER NAME Givens-Davis, Amber N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069505
4	Date 01/21/2023	5 Payee name The Party Depot	
6	Amount (\$) \$1,437.02 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 3860 Hemphill Street Fort Worth, TX 76110	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Des Event Expense balloon	Cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense decorations
9	9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH C/OH C/OH Office held		
	Date 04/15/2023	Payee name UPS	
	Amount (\$) \$360.00 X Reimbursement from political contributions intended		
	PURPOSE OF EXPENDITURE	Dallas, TX 75219 Category (See Categories listed at the top of this schedule) Fees UPS bo	Cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Offic	e sought Office held