

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00087718	2 Total pages filed: 89	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs.	FIRST Julia Yasmin	MI MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/16/2024
	NICKNAME	LAST Simon	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 3507 Crescent Avenue Dallas, TX 75205		ZIP CODE	Date Hand-delivered or Date Postmarked
			Receipt #	Amount
			Date Processed	
			Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Lindsay	MI MI	
	NICKNAME	LAST Billingsley	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 5369 Nakoma Dr Dallas, TX 75209		APT / SUITE #;	CITY; STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE (214)	PHONE NUMBER 725-6990	EXTENSION	
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 07/01/2023	THROUGH	Month Day Year 12/31/2023	
10 ELECTION	ELECTION DATE Month Day Year 03/05/2024		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) State Representative District 108	

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Simon, Julia Yasmin (Mrs.)	14 Filer ID (Ethics Commission Filers) 00087718
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME <hr/> COMMITTEE ADDRESS <hr/> COMMITTEE CAMPAIGN TREASURER NAME <hr/> COMMITTEE CAMPAIGN TREASURER ADDRESS <hr/>

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 216,652.64
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 1,631.97
	4. TOTAL POLITICAL EXPENDITURES	\$ 138,934.34
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 208,608.98
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 51,000.00

17 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.

Mrs. Julia Yasmin Simon

Signature of Candidate or Officeholder

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 Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Simon, Julia Yasmin (Mrs.)		19 Filer ID (Ethics Commission Filers) 00087718
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 211,108.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 5,544.64
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 1,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 126,458.89
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 4,127.78
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 8,347.67
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/46 Rpt: 4/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aaron, Carol and Steve <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75220-2137	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Stevens Transport
Date 10/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aberly, Naomi <hr/> Contributor address; City; State; Zip Code Boston, MA 02114-4212	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aggarwal, Ashima <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11215-1284	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amini, Celine <hr/> Contributor address; City; State; Zip Code Mclean, VA 22102-2816	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis & Bockius LLP
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angle, Matt <hr/> Contributor address; City; State; Zip Code Washington, DC 20003-2611	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Lone Star Project

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/46 Rpt: 5/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 10/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anthony, Rebecca	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75214-3815	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Jones Day
Date 09/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anthony, Rebecca	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75214-3815	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jones Day
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baer, Henry	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75225-5945	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Baer Law Firm
Date 12/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barley, Lisa	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Laguna Hills, CA 92653-7506	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Simon Greenstone Panatier PC
Date 08/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baron, Lisa	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75209-1501	
Principal occupation / Job title (See Instructions) Trial Attorney		Employer (See Instructions) Baron & Blue

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/46 Rpt: 6/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 11/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baumstark, Bartholomew <hr/> 6 Contributor address; City; State; Zip Code Saint Louis, MO 63104-4047	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) O'Brien Law Firm
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belluck, Joseph <hr/> Contributor address; City; State; Zip Code Woodstock, NY 12498-2403	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Belluck & Fox
Date 08/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, Jill <hr/> Contributor address; City; State; Zip Code New York, NY 10024-6479	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billingsley, Lindsay <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-5619	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Alliance Residential
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyd, Sam <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206-4163	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Boyd & Associates

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/46 Rpt: 7/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 11/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Branson, Debbie <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75205-1252	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Law Offices of Frank L Branson
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breitfeller, Nancy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-2701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Fulham Road Partners
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brockland, Michael <hr/> Contributor address; City; State; Zip Code Saint Louis, MO 63104-2914	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) SWMW Law
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Browder, Perry <hr/> Contributor address; City; State; Zip Code Glenview, IL 60025-4191	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Simmons Hanly Conroy
Date 09/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Victoria <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-1627	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/46 Rpt: 8/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 10/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruder, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75209-5522	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruder, Rebecca <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-3442	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Budd, Russell <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-6419	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Baron and Budd P.C.
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bullock, Angela <hr/> Contributor address; City; State; Zip Code Spring, TX 77379-8709	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bullock Campbell Bullock & Harris
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Thomas J. <hr/> Contributor address; City; State; Zip Code Chicago, IL 60654-6298	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/46 Rpt: 9/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 09/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Card, Melissa <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90068-3136	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Business owner		9 Employer (See Instructions) Asbestos Reporters
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlton, Dale <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229-5461	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheek, Lindsey <hr/> Contributor address; City; State; Zip Code New Orleans, LA 70115-6563	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney/Owner		Employer (See Instructions) The Cheek Law Firm LLC
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Alexander <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206-5415	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Haynes and Boone LLP
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clouston, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230-3411	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sessions Israel & Shartle

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/46 Rpt: 10/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 10/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Scott	7 Amount of Contribution (\$) \$2,500.00
6 Contributor address; City; State; Zip Code Dallas, TX 75229-6304		
8 Principal occupation / Job title (See Instructions) Financial advisor		9 Employer (See Instructions) CD Wealth Management
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Lee	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Dallas, TX 75225-8110		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conover, Donald	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Scottsdale, AZ 85266-1224		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conover, Donald	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Scottsdale, AZ 85266-1224		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooney, John	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Chicago, IL 60614-6903		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Cooney & Conway LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/46 Rpt: 11/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 12/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper Hart Leggiere & Whitehead PLLC	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code The Woodlands, TX 77380-1149		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Thomas	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Dallas, TX 75219-4818		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Remy Cointreau
Date 08/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corey, David	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Dallas, TX 75205-3019		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UT Southwestern
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cosmich, John	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Jackson, MS 39211-7009		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Cosmich Simmons & Brown PLLC
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courseau, Stephan	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Dallas, TX 75204-7804		
Principal occupation / Job title (See Instructions) Restauranteur		Employer (See Instructions) DCFOURTEEN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/46 Rpt: 12/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 11/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courseau, Stephane <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75204-7804	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Restauranteur		9 Employer (See Instructions) DCFOURTEEN
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, David <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90019-2407	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis and Bockius
Date 11/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Martin <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-3001	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coxe, Simone <hr/> Contributor address; City; State; Zip Code West Lake Hills, TX 78746-3601	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crook, Nancy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230-3508	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Tutor		Employer (See Instructions) Self-employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/46 Rpt: 13/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 10/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crump, Ashley	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Dallas, TX 75205-1629		
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) GlaxoSmithKline
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Janice	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Dallas, TX 75229-6313		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Joseph	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Dallas, TX 75209-1731		
Principal occupation / Job title (See Instructions) Geologist		Employer (See Instructions) Kalnin Ventures
Date 08/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Joseph	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Dallas, TX 75209-1731		
Principal occupation / Job title (See Instructions) Geologist		Employer (See Instructions) Kalnin Ventures
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Lisa	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Dallas, TX 75230-5049		
Principal occupation / Job title (See Instructions) Model agent		Employer (See Instructions) Kim Dawson Agency

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/46 Rpt: 14/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 12/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Degnen, Bridget	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Chicago, IL 60618-4923		
8 Principal occupation / Job title (See Instructions) Commissioner		9 Employer (See Instructions) Cook County
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dewar, Claire	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Dallas, TX 75209-5615		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickenson, Tiffany	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Southlake, TX 76092-2618		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Simon Greenstone Panatier
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickson, Rachel	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Garland, TX 75044-4993		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis & Bockius LLP
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobesh, David	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Madison, NJ 07940-1630		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) New Jersey Cardiology Associates

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/46 Rpt: 15/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 10/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drazner, Laurie <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75225-7004	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dropkin, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230-4131	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CIO		Employer (See Instructions) CD Wealth
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Sean <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035-8328	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Chief Proactive Advisors LLC
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Early, Ethan <hr/> Contributor address; City; State; Zip Code New York, NY 10014-1861	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Early Law Firm
Date 08/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Early, James <hr/> Contributor address; City; State; Zip Code New Haven, CT 06508-1866	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Early Lucarelli Sweeney & Meisenkothen LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/46 Rpt: 16/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 10/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enloe, Ted <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75219-5546	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Balquita Partners Ltd.
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Abby <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-5926	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self employed
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fallah, Melissa <hr/> Contributor address; City; State; Zip Code Chicago, IL 60614-5129	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Maron Marvel
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feingold, Stephanie <hr/> Contributor address; City; State; Zip Code Jersey City, NJ 07302-6497	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis & Bockius LLP
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fikes, Amy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-3103	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/46 Rpt: 17/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 12/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fikes, Amy <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75205-3103	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finer, Daniel <hr/> Contributor address; City; State; Zip Code Chicago, IL 60614-3124	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-5835	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Field Representative		Employer (See Instructions) U. S. Census Bureau
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Samantha <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230-2833	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Interior Designer		Employer (See Instructions) Self-employed
Date 11/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fredericks, Sara <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229-5117	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Commercial Real Estate Broker		Employer (See Instructions) Newmark

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/46 Rpt: 18/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 12/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galvan, Hilda	7 Amount of Contribution (\$) \$2,500.00
6 Contributor address; City; State; Zip Code Dallas, TX 75225-4841		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Jones Day
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gay, Mary Margaret	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Jackson, MS 39211-5852		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Gay Jones
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Genender, Amy	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Dallas, TX 75205-3604		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goucher, Lisa	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Commerce, TX 75428-5884		
Principal occupation / Job title (See Instructions) Court reporting		Employer (See Instructions) Goucher Parker Spivey
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goyer, Anne	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dallas, TX 75205-3006		
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/46 Rpt: 19/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 09/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griswold, Gail <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75225-2824	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gronik, Andy <hr/> Contributor address; City; State; Zip Code Fox Point, WI 53217-3658	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gruber, Steven <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-7640	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Blumenthal & Gruber
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guajardo, Michael <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-5328	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) DC Law
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halum, Faisal <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-4336	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Briggs Freeman Sothebys

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/46 Rpt: 20/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 07/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harkinson, Sarah <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75229-6407	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Jillian <hr/> Contributor address; City; State; Zip Code Dallas, TX 75208-2611	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heald, Freda <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-6221	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Temple Emanu-el
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helfand, Marcy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240-5510	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Marcy C Helfand PC
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herlihy, Jennifer <hr/> Contributor address; City; State; Zip Code Charlestown, MA 02129-1901	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Adler Cohen

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/46 Rpt: 21/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 08/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hickman, Treasure <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230-3541	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Pat <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238-1807	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Pat <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238-1807	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Himes, Kayla <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-2028	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Public Defender		Employer (See Instructions) Dallas County
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Richard <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-3053	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Restauranteur		Employer (See Instructions) La Madeleine

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/46 Rpt: 22/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 10/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Michael	7 Amount of Contribution (\$) \$5,000.00
6 Contributor address; City; State; Zip Code Dallas, TX 75230-1701		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Michael L. Hoffman P.C.
Date 09/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hong, Laura	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Cleveland Heights, OH 44106-2801		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Tucker Ellis
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins, H Kate	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Dallas, TX 75230-3400		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horne, Nathan	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Austin, TX 78701-2744		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Segal McCambridge
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Beth	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Houston, TX 77008-6340		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/46 Rpt: 23/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 09/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hultquist, Nagwa <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20007-3059	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Morgan Lewis
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hytken, Frank <hr/> Contributor address; City; State; Zip Code Dallas, TX 75379-4055	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Iola, Mark H <hr/> Contributor address; City; State; Zip Code Aspen, CO 81612	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Iola Galerston
Date 09/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Iola, Sam <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-3336	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Dean Omar Branham Shirley
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Jeffery <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-4428	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Venture Capital		Employer (See Instructions) Thayer Ventures

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/46 Rpt: 24/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 09/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Eric <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75219-5513	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions) Dallas ISD
Date 09/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Katie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-1393	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) Credible
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaeske, Michael <hr/> Contributor address; City; State; Zip Code Austin, TX 78705-4236	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Kaeske Law Firm
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kagan, Leah <hr/> Contributor address; City; State; Zip Code Dallas, TX 75246-1135	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Simon Greenstone Panatier
Date 12/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karol, Thomas <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229-6648	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Cornerstone Automation Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/46 Rpt: 25/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 11/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kherkher, Steven	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Houston, TX 77098-3145		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Kherkher Garcia LLP
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kissinger, William	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Mill Valley, CA 94941-3411		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kleinman, Betsy	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Dallas, TX 75230-3130		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klion, Howard	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Dallas, TX 75225-1626		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klion, Howard	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Dallas, TX 75225-1626		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/46 Rpt: 26/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 09/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klion, Howard <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75225-1626	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knape, Susan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-6005	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) A Case for Women LLC
Date 09/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kniffen, Anne <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230-5109	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Perkins & Will
Date 09/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kraus, Lisa <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-2024	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacher, Kerri <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Interior Designer		Employer (See Instructions) Self-employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/46 Rpt: 27/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 10/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lambert, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75205-3608	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Seyfarth Shaw
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Layman, Richard <hr/> Contributor address; City; State; Zip Code Dallas, TX 75208-2621	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Anesthesiologist		Employer (See Instructions) USAP
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lidji, Brian <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-2406	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Pyschothearpist		Employer (See Instructions) Self
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lidji, Fay <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-2406	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Pyschothearpist		Employer (See Instructions) Self
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lone Star Project Nonfederal <hr/> Contributor address; City; State; Zip Code Washington, DC 20003-2611	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/46 Rpt: 28/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 12/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lone Star Project Nonfederal	7 Amount of Contribution (\$) \$2,500.00
6 Contributor address; City; State; Zip Code Washington, DC 20003-2611		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Laura	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Houston, TX 77008-4188		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis & Bockius LLP
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyon Loncar Jenkins Attorneys at Law	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code Dallas, TX 75201-5808		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyons, Michael	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Dallas, TX 75201-2151		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Lyons & Simmons LLP
Date 11/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magilow, Stephanie	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75205-3244		
Principal occupation / Job title (See Instructions) EA		Employer (See Instructions) True North

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/46 Rpt: 29/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 10/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magner, Michael	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code New Orleans, LA 70116-2431		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Jones Walker LLP
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manhas, Atisha	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75225-7647		
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Texas Oncology
Date 09/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, David	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Atlanta, GA 30339-4265		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hawkins Parnell
Date 08/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massenburg, Christopher	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code New Orleans, LA 70130-6539		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) MG+M Law
Date 10/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mattock, Bruce	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Pittsburgh, PA 15206-4052		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Goldberg Persky and White PC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/46 Rpt: 30/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 11/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazero, John <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75214-4034	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAdams, Annie <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-1848	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Annie McAdams PC
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDowell, Pat <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-4830	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) NLG
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKeithen, Polly <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-1646	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Highland Park ISD
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcdermett, Don <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-5544	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Winston & Strawn LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/46 Rpt: 31/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 12/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melton, Mark <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75228-5936	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Holland & Knight LLP
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Clay <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243-3920	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Miller Weisbrod
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Patricia <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-3226	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moir, Peter <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-1215	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mortensen, Mike <hr/> Contributor address; City; State; Zip Code Richardson, TX 75082-2674	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis & Bockius LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/46 Rpt: 32/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 10/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mote, Robin <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75209-5902	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Mote And Associates Inc.
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mudry, Eric <hr/> Contributor address; City; State; Zip Code Guilford, CT 06437-2037	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Law Forum
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murdica, James <hr/> Contributor address; City; State; Zip Code Morris, CT 06763	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Barnes & Thornburg
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, Kathleen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230-4459	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Ebby Halliday
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, Kathy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230-4459	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Ebby Halliday Realtors

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/46 Rpt: 33/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 09/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nachawati II, Nabil <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75214-2918	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Nachawati Law Group
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neil, JoDee <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229-3803	Amount of Contribution (\$) \$108.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Simon Greenstone
Date 09/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nes, Brad <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75022-7843	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norton, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231-6033	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Shackelford Bowen McKinley & Norton LLP
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Novakidis, Stephen <hr/> Contributor address; City; State; Zip Code Livingston, NJ 07039-2813	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Foley & Mansfield

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/46 Rpt: 34/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 11/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Donnell, Erika	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Dedham, MA 02026-5254		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Shepard O'Donnell
Date 07/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oringer, Nicole	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Bedminster, NJ 07921-2686		
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) Self Employed
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Carol	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Dallas, TX 75230-2147		
Principal occupation / Job title (See Instructions) Publishing		Employer (See Instructions) Self Employed
Date 08/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Carol	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Dallas, TX 75230-2147		
Principal occupation / Job title (See Instructions) Publishing		Employer (See Instructions) Self Employed
Date 09/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owen, Jennifer	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75214-1602		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Higier Allen & Lautin PC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/46 Rpt: 35/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 07/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacetti, Joe <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75225-1564	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) J. Pacetti Precious Jewels
Date 10/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Panatier, Chris <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218-4314	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Simon Greenstone Panatier PC
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Nancy <hr/> Contributor address; City; State; Zip Code Houston, TX 77019-3615	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potts, Garry <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-6011	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Video producer		Employer (See Instructions) Self Employed
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Lynne <hr/> Contributor address; City; State; Zip Code New York, NY 10003-4905	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/46 Rpt: 36/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 09/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pryor, Ellen <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75229-5252	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purdy, Stuart <hr/> Contributor address; City; State; Zip Code Manhattan Beach, CA 90266-4603	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Simon Greenstone Panatier PC
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quesada, Tex <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219-4693	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sommerman McCaffity Quesada & Geisler
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Romeo, Rose <hr/> Contributor address; City; State; Zip Code Alpharetta, GA 30022-7849	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Tracy <hr/> Contributor address; City; State; Zip Code Lake Geneva, WI 53147-3744	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Tracie Rose

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/46 Rpt: 37/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 10/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosen, Joseph <hr/> 6 Contributor address; City; State; Zip Code Southborough, MA 01772-4005	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Brown & Rosen LLC
Date 08/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Runyon, Lisa <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229-6601	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, John <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201-4432	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) John R. Salazar P.C.
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salmen, Joanna <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55418-4037	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Foley Mansfield
Date 08/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Nancy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229-6609	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/46 Rpt: 38/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 10/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Nancy P <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75229-6609	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Nancy P <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229-6609	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanford, Shelly <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-1830	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Shelly Sanford
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sbaiti, Katherine <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-3621	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sbaiti & Company PLLC
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaub, Patricia <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-2042	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/46 Rpt: 39/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 11/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlosser, Rodney <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230-3830	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Business Development		9 Employer (See Instructions) Asurion
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scrudato, Paul <hr/> Contributor address; City; State; Zip Code New York, NY 10025-7327	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaffer, Brian <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19118-4012	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siegel, Glenn <hr/> Contributor address; City; State; Zip Code Short Hills, NJ 07078-3306	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons Hanly Conroy, LLP <hr/> Contributor address; City; State; Zip Code Alton, IL 62002-6267	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/46 Rpt: 40/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 11/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Lisa <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75220-2121	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) Contran Corporation
Date 09/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Karen <hr/> Contributor address; City; State; Zip Code Benbrook, TX 76132-1079	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Real estate broker		Employer (See Instructions) Emersons CRE
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Dawn <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201-3829	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Curtis Clinesmith LLP
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soechting, Charles <hr/> Contributor address; City; State; Zip Code Dallas, TX 75208-3554	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Simon Greenstone Panatier
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stahl, Patricia <hr/> Contributor address; City; State; Zip Code Dallas, TX 75226-1526	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/46 Rpt: 41/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 09/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanford, Sonjia <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75225-4819	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Asst Director of Online Program		9 Employer (See Instructions) Southern Methodist University
Date 08/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steckler, Bruce <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Steckler Wayne & Love PLLC
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steves, Buddy <hr/> Contributor address; City; State; Zip Code Houston, TX 77030-3602	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Chair and President		Employer (See Instructions) Financial Casualty and Surety, Inc.
Date 08/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, James <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248-5425	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Jessica L. <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218-1004	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/46 Rpt: 42/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 09/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strubeck, Louis <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75238-4217	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) O Melveny & Myers
Date 11/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stueve, Robert <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-4405	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Sales Manager		Employer (See Instructions) Tom James Company
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swarr, Frank <hr/> Contributor address; City; State; Zip Code New Orleans, LA 70163-2000	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Landry & Swarr LLC
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Syed, Hisham <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230-2739	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tabasky, Jonathan <hr/> Contributor address; City; State; Zip Code Sudbury, MA 01776-2817	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) MG+M The Law Firm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/46 Rpt: 43/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 09/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Talarico, Amy J. <hr/> 6 Contributor address; City; State; Zip Code El Cerrito, CA 94530-1404	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Morgan Lewis
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tayyab, Rita <hr/> Contributor address; City; State; Zip Code Quincy, IL 62305-8093	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tayyab, Rita <hr/> Contributor address; City; State; Zip Code Quincy, IL 62305-8093	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tayyab, Rita <hr/> Contributor address; City; State; Zip Code Quincy, IL 62305-8093	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ted B. Lyon & Associates P.C. <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75150-5600	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/46 Rpt: 44/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 12/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tichenor, Lisa <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75205-2128	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tomback, Diana <hr/> Contributor address; City; State; Zip Code Denver, CO 80237-2014	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Colorado
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trowbridge, Peggy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201-5928	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Sheryl <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-3001	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tully, Brendan <hr/> Contributor address; City; State; Zip Code Yorktown Heights, NY 10598-4315	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Simon Greenstone Panatier

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/46 Rpt: 45/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 11/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Cameron	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Miami Beach, FL 33139-3266		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Segl McCambridge Singer & Mahoney
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Lisa	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Grand Prairie, TX 75054-6792		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vendrell, Michael	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Dallas, TX 75205-1848		
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Self Employed
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vinson Jr., Ben	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Tampa, FL 33629-4201		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Vinson Law
Date 12/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vogelzang, Nicholas	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code Chicago, IL 60611-4205		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Vogelzang Law

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/46 Rpt: 46/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 11/15/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vroom, Anne Clayton <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75209-5521	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) Self employed
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waksler, Craig <hr/> Contributor address; City; State; Zip Code Boston, MA 02110	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Eckert Seamans
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walter, Steven <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231-1514	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Hlreright
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, Carolyn <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-7033	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Edward <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218-3206	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Dallas ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/46 Rpt: 47/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 09/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wasserberg, Daniel <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10018-0933	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Meiowitz & Wasserberg LLP
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waxman, Ilana <hr/> Contributor address; City; State; Zip Code Haiku, HI 96708-5560	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Galiher DeRobertis & Waxman
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weisbrod, Carl <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230-2929	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weitz, Perry <hr/> Contributor address; City; State; Zip Code Miami Beach, FL 33139-5139	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Weitz & Luxenberg PC
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Abigail <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209-2221	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) United to Learn

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/46 Rpt: 48/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 10/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfson, Douglas	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Wellesley, MA 02482-6405		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Commercehub
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolman, Don	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Dallas, TX 75252-5316		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wynne, Shannon	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Dallas, TX 75205-2102		
Principal occupation / Job title (See Instructions) Restaurant Owner		Employer (See Instructions) 80 Inc.
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Sharon	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Dallas, TX 75220-2024		
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Quadrant Holdings
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Sharon	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Dallas, TX 75220-2024		
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Quadrant Holdings

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/46 Rpt: 49/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Date 09/18/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Sharon <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75220-2024	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Investor		9 Employer (See Instructions) Quadrant Holdings
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zeb, Sumbel <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75032-8266	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Development Director		Employer (See Instructions) Quindigo Management
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zevnik, Paul <hr/> Contributor address; City; State; Zip Code Washington, DC 20016-3549	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 50/89	
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 09/21/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billingsley, Lindsay	8 Amount of contribution (\$) \$3,000.00	9 In-kind contribution description Campaign event catering
	7 Contributor address; City; State; Zip Code Dallas, TX 75209-5619	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Real Estate		11 Employer (FOR NON-JUDICIAL) (See instructions) Alliance Residential	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Early, Brian	Amount of contribution (\$) \$1,540.58	In-kind contribution description Fundraising event catering and staff
	Contributor address; City; State; Zip Code New York, NY 10014-1861	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Attorney		Employer (FOR NON-JUDICIAL) (See instructions) Early Lucarelli Sweeney & Meisenkothen	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klion, Amy	Amount of contribution (\$) \$1,004.06	In-kind contribution description Fundraising event staff and catering
	Contributor address; City; State; Zip Code Dallas, TX 75225	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Not Employed		Employer (FOR NON-JUDICIAL) (See instructions) Not Employed	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 51/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 12/07/2023	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Jeffrey	9 Loan Amount (\$) \$1,000.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code Dallas, TX 75205	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions) Attorney		13 Employer (See Instructions) Simon Greenstone Panatier, PC
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 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.

1 Total pages Schedule F1: Sch: 1/23 Rpt: 52/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 07/02/2023	5 Payee name ActBlue	
6 Amount (\$) \$7,067.13	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fees - 7/1/23-12/31/23
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/17/2023	Payee name American Airlines	
Amount (\$) \$554.80	Payee address; City; State; Zip Code PO Box 619616 Dfw Airport, TX 75261-9616	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant travel for photoshoot
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/17/2023	Payee name American Airlines	
Amount (\$) \$390.00	Payee address; City; State; Zip Code PO Box 619616 Dfw Airport, TX 75261-9616	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant travel for photoshoot
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.

1 Total pages Schedule F1: Sch: 2/23 Rpt: 53/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 08/28/2023	5 Payee name Bank of Texas	
6 Amount (\$) \$1,433.83	7 Payee address; City; State; Zip Code PO Box 29775 Dallas, TX 75229-0775	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2023	Payee name Bank of Texas	
Amount (\$) \$2.00	Payee address; City; State; Zip Code PO Box 29775 Dallas, TX 75229-0775	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/31/2023	Payee name Bank of Texas	
Amount (\$) \$2.00	Payee address; City; State; Zip Code PO Box 29775 Dallas, TX 75229-0775	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
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.

1 Total pages Schedule F1: Sch: 3/23 Rpt: 54/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 08/31/2023	5 Payee name Bank of Texas	
6 Amount (\$) \$2.00	7 Payee address; City; State; Zip Code PO Box 29775 Dallas, TX 75229-0775	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2023	Payee name Bank of Texas	
Amount (\$) \$2.00	Payee address; City; State; Zip Code PO Box 29775 Dallas, TX 75229-0775	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2023	Payee name Bank of Texas	
Amount (\$) \$2.00	Payee address; City; State; Zip Code PO Box 29775 Dallas, TX 75229-0775	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete <u>ONLY</u> 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.

1 Total pages Schedule F1: Sch: 4/23 Rpt: 55/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 10/12/2023	5 Payee name Bank of Texas	
6 Amount (\$) \$189.53	7 Payee address; City; State; Zip Code PO Box 29775 Dallas, TX 75229-0775	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/29/2023	Payee name Bank of Texas	
Amount (\$) \$15.00	Payee address; City; State; Zip Code PO Box 29775 Dallas, TX 75229-0775	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire transfer fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name Bank of Texas	
Amount (\$) \$2.00	Payee address; City; State; Zip Code PO Box 29775 Dallas, TX 75229-0775	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
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.

1 Total pages Schedule F1: Sch: 5/23 Rpt: 56/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 12/29/2023	5 Payee name Bank of Texas	
6 Amount (\$) \$2.00	7 Payee address; City; State; Zip Code PO Box 29775 Dallas, TX 75229-0775	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/20/2023	Payee name Bank of Texas	
Amount (\$) \$15.00	Payee address; City; State; Zip Code PO Box 29775 Dallas, TX 75229-0775	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/14/2023	Payee name Bank of Texas	
Amount (\$) \$518.23	Payee address; City; State; Zip Code PO Box 29775 Dallas, TX 75229-0775	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
Complete <u>ONLY</u> 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.

1	Total pages Schedule F1: Sch: 6/23 Rpt: 57/89	2	FILER NAME Simon, Julia Yasmin (Mrs.)	3	Filer ID (Ethics Commission Filers) 00087718	
4	Date 09/26/2023	5	Payee name Bank of Texas			
6	Amount (\$) \$608.83	7	Payee address; City; State; Zip Code PO Box 29775 Dallas, TX 75229-0775			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment			
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 07/18/2023		Payee name Blue Nation Strategies			
	Amount (\$) \$2,799.67		Payee address; City; State; Zip Code 5900 Harwick Rd Bethesda, MD 20816-1103			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Car magnets and campaign printed materials			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 07/18/2023		Payee name Blue Nation Strategies			
	Amount (\$) \$5,000.00		Payee address; City; State; Zip Code 5900 Harwick Rd Bethesda, MD 20816-1103			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Campaign website development			
		Complete <u>ONLY</u> 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.

1 Total pages Schedule F1: Sch: 7/23 Rpt: 58/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 09/13/2023	5 Payee name Blue Nation Strategies	
6 Amount (\$) \$4,615.80	7 Payee address; City; State; Zip Code 5900 Harwick Rd Bethesda, MD 20816-1103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Campaign printed materials
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/11/2023	Payee name Blue Nation Strategies	
Amount (\$) \$1,153.06	Payee address; City; State; Zip Code 5900 Harwick Rd Bethesda, MD 20816-1103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Campaign printed materials
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/28/2023	Payee name Blue Nation Strategies	
Amount (\$) \$5,539.16	Payee address; City; State; Zip Code 5900 Harwick Rd Bethesda, MD 20816-1103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Campaign New Years card printing and design
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.

1 Total pages Schedule F1: Sch: 8/23 Rpt: 59/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 09/11/2023	5 Payee name Blue Scout Digital LLC	
6 Amount (\$) \$820.00	7 Payee address; City; State; Zip Code 2505 Royal Birkdale Dr Plano, TX 75025-5067	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Campaign digital consulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2023	Payee name Blue Scout Digital LLC	
Amount (\$) \$820.00	Payee address; City; State; Zip Code 2505 Royal Birkdale Dr Plano, TX 75025-5067	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Campaign digital consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/30/2023	Payee name Crump, Ashley	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 4300 McFarlin Blvd Dallas, TX 75205	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Contribution refund
Complete <u>ONLY</u> 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.

1 Total pages Schedule F1: Sch: 9/23 Rpt: 60/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
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4 Date 11/17/2023	5 Payee name Dallas County Democratic Party
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6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 414 N Washington Ave Dallas, TX 75246-1705
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8 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 Ballot filing fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/26/2023	Payee name Eli Turner Photography
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Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 6 Granville Dr Silver Spring, MD 20901-3010
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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 Candidate photography for campaign materials
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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 07/07/2023	Payee name Frederick Polls
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Amount (\$) \$25,000.00	Payee address; City; State; Zip Code 350 S 200 E Unit 722 Salt Lake City, UT 84111-2853
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 Campaign polling
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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.

1 Total pages Schedule F1: Sch: 10/23 Rpt: 61/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 07/24/2023	5 Payee name Gutierrez, Sarah	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 401 Middle Crk Buda, TX 78610-2765	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Campaign operations consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/25/2023	Payee name Gutierrez, Sarah	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 401 Middle Crk Buda, TX 78610-2765	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Campaign operations consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/17/2023	Payee name Gutierrez, Sarah	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 401 Middle Crk Buda, TX 78610-2765	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Campaign operations consulting
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.

1 Total pages Schedule F1: Sch: 11/23 Rpt: 62/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 11/30/2023	5 Payee name Gutierrez, Sarah	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 401 Middle Crk Buda, TX 78610-2765	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Campaign operations consulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2023	Payee name Gutierrez, Sarah	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 401 Middle Crk Buda, TX 78610-2765	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Campaign operations consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2023	Payee name Gutierrez, Sarah	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 401 Middle Crk Buda, TX 78610-2765	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Campaign operations consulting
Complete <u>ONLY</u> 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.

1 Total pages Schedule F1: Sch: 12/23 Rpt: 63/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 08/31/2023	5 Payee name Internal Revenue Service	
6 Amount (\$) \$247.50	7 Payee address; City; State; Zip Code PO Box 409101 Ogden, UT 84409-9101	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2023	Payee name Internal Revenue Service	
Amount (\$) \$247.50	Payee address; City; State; Zip Code PO Box 409101 Ogden, UT 84409-9101	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2023	Payee name Internal Revenue Service	
Amount (\$) \$229.50	Payee address; City; State; Zip Code PO Box 409101 Ogden, UT 84409-9101	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
Complete <u>ONLY</u> 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 -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/23 Rpt: 64/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 09/30/2023	5 Payee name Internal Revenue Service	
6 Amount (\$) \$235.50	7 Payee address; City; State; Zip Code PO Box 409101 Ogden, UT 84409-9101	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name Internal Revenue Service	
Amount (\$) \$717.51	Payee address; City; State; Zip Code PO Box 409101 Ogden, UT 84409-9101	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2023	Payee name Internal Revenue Service	
Amount (\$) \$771.51	Payee address; City; State; Zip Code PO Box 409101 Ogden, UT 84409-9101	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
Complete <u>ONLY</u> 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.

1 Total pages Schedule F1: Sch: 14/23 Rpt: 65/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 08/31/2023	5 Payee name McKeithen, Emily A	
6 Amount (\$) \$3,000.00	7 Payee address; City; State; Zip Code 4229 Willow Grove Rd Dallas, TX 75220-1935	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2023	Payee name McKeithen, Emily A	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 4229 Willow Grove Rd Dallas, TX 75220-1935	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2023	Payee name McKeithen, Emily A	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 4229 Willow Grove Rd Dallas, TX 75220-1935	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
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.

1 Total pages Schedule F1: Sch: 15/23 Rpt: 66/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 09/30/2023	5 Payee name McKeithen, Emily A	
6 Amount (\$) \$3,000.00	7 Payee address; City; State; Zip Code 4229 Willow Grove Rd Dallas, TX 75220-1935	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name McKeithen, Emily A	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 4229 Willow Grove Rd Dallas, TX 75220-1935	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name McKeithen, Emily A	
Amount (\$) \$190.19	Payee address; City; State; Zip Code 4229 Willow Grove Rd Dallas, TX 75220-1935	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Mileage reimbursement
Complete <u>ONLY</u> 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.

1 Total pages Schedule F1: Sch: 16/23 Rpt: 67/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 12/29/2023	5 Payee name McKeithen, Emily A	
6 Amount (\$) \$3,000.00	7 Payee address; City; State; Zip Code 4229 Willow Grove Rd Dallas, TX 75220-1935	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/25/2023	Payee name NGP VAN	
Amount (\$) \$266.50	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign database subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2023	Payee name NGP VAN	
Amount (\$) \$266.50	Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 campaign database subscription
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.

1 Total pages Schedule F1: Sch: 17/23 Rpt: 68/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 12/04/2023	5 Payee name NGP VAN	
6 Amount (\$) \$266.50	7 Payee address; City; State; Zip Code 655 15th St NW Ste 650 Washington, DC 20005-5738	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign database subscription
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/18/2023	Payee name Quickbooks	
Amount (\$) \$45.31	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting and payroll software subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/18/2023	Payee name Quickbooks	
Amount (\$) \$39.98	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting and payroll software subscription
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.

1 Total pages Schedule F1: Sch: 18/23 Rpt: 69/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 09/18/2023	5 Payee name Quickbooks	
6 Amount (\$) \$50.64	7 Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting and payroll software subscription
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/18/2023	Payee name Quickbooks	
Amount (\$) \$90.61	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting and payroll software subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2023	Payee name Quickbooks	
Amount (\$) \$95.94	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting and payroll software subscription
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.

1 Total pages Schedule F1: Sch: 19/23 Rpt: 70/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 12/18/2023	5 Payee name Quickbooks	
6 Amount (\$) \$95.94	7 Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting and payroll software subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/02/2023	Payee name Rodman, Megan	
Amount (\$) \$4,000.00	Payee address; City; State; Zip Code 5503 Mercedes Ave Dallas, TX 75206-5821	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Fundraising consulting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2023	Payee name Rodman, Megan	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 5503 Mercedes Ave Dallas, TX 75206-5821	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Fundraising consulting services
Complete <u>ONLY</u> 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.

1 Total pages Schedule F1: Sch: 20/23 Rpt: 71/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 10/17/2023	5 Payee name Rodman, Megan	
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 5503 Mercedes Ave Dallas, TX 75206-5821	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Fundraising consulting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2023	Payee name Rodman, Megan	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 5503 Mercedes Ave Dallas, TX 75206-5821	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Fundraising consulting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/11/2023	Payee name Rodman, Megan	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 5503 Mercedes Ave Dallas, TX 75206-5821	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Fundraising consulting services
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.

1 Total pages Schedule F1: Sch: 21/23 Rpt: 72/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 08/31/2023	5 Payee name Texas Workforce Commission	
6 Amount (\$) \$81.00	7 Payee address; City; State; Zip Code 311 W 13th St Austin, TX 78701-1822	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 07/31/2023	Payee name Texas Workforce Commission	
Amount (\$) \$81.00	Payee address; City; State; Zip Code 311 W 13th St Austin, TX 78701-1822	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 09/30/2023	Payee name Texas Workforce Commission	
Amount (\$) \$81.00	Payee address; City; State; Zip Code 311 W 13th St Austin, TX 78701-1822	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
	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.

1 Total pages Schedule F1: Sch: 22/23 Rpt: 73/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
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4 Date 11/30/2023	5 Payee name Texas Workforce Commission
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6 Amount (\$) \$159.71	7 Payee address; City; State; Zip Code 311 W 13th St Austin, TX 78701-1822
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2023	Payee name Texas Workforce Commission
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Amount (\$) \$83.29	Payee address; City; State; Zip Code 311 W 13th St Austin, TX 78701-1822
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
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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 11/30/2023	Payee name Wojciechowski, Shad
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Amount (\$) \$4,415.25	Payee address; City; State; Zip Code 3507 Crescent Ave Dallas, TX 75205
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
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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.

1 Total pages Schedule F1: Sch: 23/23 Rpt: 74/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
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4 Date 11/30/2023	5 Payee name Wojciechowski, Shad
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6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 3507 Crescent Ave Dallas, TX 75205
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Relocation bonus
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2023	Payee name Wojciechowski, Shad
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Amount (\$) \$7,000.00	Payee address; City; State; Zip Code 3507 Crescent Ave Dallas, TX 75205
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
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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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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/6 Rpt: 75/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 335.50
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5 Date 12/18/2023	6 Payee name Dallas AFL-CIO
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7 Amount (\$) \$350.00	8 Payee address; City; State; Zip Code 1408 N Washington Ave Ste 240 Dallas, TX 75204-5168
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 sponsorship
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/23/2023	Payee name Dallas County Democratic Party
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Amount (\$) \$200.00	Payee address; City; State; Zip Code 414 N Washington Ave Dallas, TX 75246-1705
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 2/6 Rpt: 76/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 335.50
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5 Date 11/17/2023	6 Payee name Dickey's Barbecue Pit
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7 Amount (\$) \$547.48	8 Payee address; City; State; Zip Code 4610 N US 75 Central Expy 1000 Dallas, TX 75206
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 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 Fundraising event catering
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/27/2023	Payee name JoJos Sweeterie
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Amount (\$) \$191.82	Payee address; City; State; Zip Code 4923 Deloache Ave Dallas, TX 75220-2001
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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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 Campaign event food
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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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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 3/6 Rpt: 77/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 335.50
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5 Date 08/30/2023	6 Payee name Lake Highlands/White Rock Democrats
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7 Amount (\$) \$250.00	8 Payee address; City; State; Zip Code PO Box 180598 Dallas, TX 75218-0598
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 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 sponsorship
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/31/2023	Payee name Phone Burner
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Amount (\$) \$158.83	Payee address; City; State; Zip Code 1968 S Coast Hwy Ste 1800 Laguna Beach, CA 92651-3681
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Phone for campaign use
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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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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 4/6 Rpt: 78/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 335.50
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5 Date 08/29/2023	6 Payee name Phone Burner
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7 Amount (\$) \$158.83	8 Payee address; City; State; Zip Code 1968 S Coast Hwy Ste 1800 Laguna Beach, CA 92651-3681
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Phone for campaign use
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/29/2023	Payee name Phone Burner
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Amount (\$) \$158.83	Payee address; City; State; Zip Code 1968 S Coast Hwy Ste 1800 Laguna Beach, CA 92651-3681
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Phone for campaign use
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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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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 5/6 Rpt: 79/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 335.50
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5 Date 10/30/2023	6 Payee name Phone Burner
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7 Amount (\$) \$158.83	8 Payee address; City; State; Zip Code 1968 S Coast Hwy Ste 1800 Laguna Beach, CA 92651-3681
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Phone for campaign use
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/29/2023	Payee name Phone Burner
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Amount (\$) \$158.83	Payee address; City; State; Zip Code 1968 S Coast Hwy Ste 1800 Laguna Beach, CA 92651-3681
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Phone for campaign use
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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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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 6/6 Rpt: 80/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 335.50
--	------------------

5 Date 11/29/2023	6 Payee name Phone Burner
-----------------------------	-------------------------------------

7 Amount (\$) \$158.83	8 Payee address; City; State; Zip Code 1968 S Coast Hwy Ste 1800 Laguna Beach, CA 92651-3681
----------------------------------	--

9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Phone for campaign use
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/31/2023	Payee name Texas Democratic Party
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Amount (\$) \$1,300.00	Payee address; City; State; Zip Code PO Box 15707 Austin, TX 78761-5707
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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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 Voter file access fee
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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 PERSONAL FUNDS

SCHEDULE G

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.

1 Total pages Schedule G: Sch: 1/6 Rpt: 81/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 08/17/2023	5 Payee name American Airlines	
6 Amount (\$) \$11.20 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 619616 Dfw Airport, TX 75261-9616	
8 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 Miles fee - air travel to Washington DC
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/15/2023	Payee name American Airlines	
Amount (\$) \$11.20 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code PO Box 619616 Dfw Airport, TX 75261-9616	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Miles fee - air travel for fundraising event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/15/2023	Payee name American Airlines	
Amount (\$) \$197.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code PO Box 619616 Dfw Airport, TX 75261-9616	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel for campaign fundraising event - value of personal AA miles used
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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.

1 Total pages Schedule G: Sch: 2/6 Rpt: 82/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 08/14/2023	5 Payee name American Airlines	
6 Amount (\$) \$403.70 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 619616 Dfw Airport, TX 75261-9616	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel for campaign fundraising event - value of personal AA miles used
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/18/2023	Payee name Dallas AFL-CIO	
Amount (\$) \$405.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1408 N Washington Ave Ste 240 Dallas, TX 75204-5168	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labor Day Breakfast Tickets
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2023	Payee name Dallas County Young Democrats	
Amount (\$) \$350.52 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 750 Fort Worth Ave Dallas, TX 75208	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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.

1 Total pages Schedule G: Sch: 3/6 Rpt: 83/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 11/21/2023	5 Payee name Funky Easy Dallas Democrats PAC	
6 Amount (\$) \$1,000.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO box 181734 Dallas, TX 75218	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 sponsorship
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 07/15/2023	Payee name Hilton Hotel - NYC	
Amount (\$) \$702.79 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1335 Avenue Of The Americas New York, NY 10019-6012	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising event travel
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 10/24/2023	Payee name Lombardi Family Concepts	
Amount (\$) \$100.95 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 3100 Monticello Ave Ste 325 Dallas, TX 75205-3477	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gift for campaign volunteer
	9 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

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.

1 Total pages Schedule G: Sch: 4/6 Rpt: 84/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 11/16/2023	5 Payee name Pizzeria Testa	
6 Amount (\$) \$706.13 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 3525 Greenville Ave Dallas, TX 75206-5629	
8 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 Campaign event food
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2023	Payee name Planned Parenthood Texas Votes	
Amount (\$) \$1,000.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 201 E Ben White Blvd Bldg B, Ste 100 Dallas, TX 78704	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/14/2023	Payee name Progress Texas	
Amount (\$) \$250.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 2525 Pacific Ave, Ste 700 Dallas, TX 75225	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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.

1 Total pages Schedule G: Sch: 5/6 Rpt: 85/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
4 Date 11/15/2023	5 Payee name Square Space	
6 Amount (\$) \$35.18 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 225 Varick St New York, NY 10014-4304	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Campaign website hosting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/12/2023	Payee name Texas Justice Demorats	
Amount (\$) \$150.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 6333 Mockingbird Ln Ste 147, Box 899 Dallas, TX 75214	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/06/2023	Payee name Texas Legal Media LLC	
Amount (\$) \$2,500.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code PO Box 181417 Dallas, TX 75218-8417	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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.

1 Total pages Schedule G: Sch: 6/6 Rpt: 86/89	2 FILER NAME Simon, Julia Yasmin (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087718
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4 Date 12/18/2023	5 Payee name The 23rd Senatorial District Tejano Democrats PAC
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6 Amount (\$) \$400.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 225905 Dallas, TX 75222
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 sponsorship
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/15/2023	Payee name United States Postal Service
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Amount (\$) \$124.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 5606 Smu Blvd Dallas, TX 75206-5018
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign PO Box
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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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IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: Sch: 1/3 Rpt: 87/89
2 FILER NAME Simon, Julia Yasmin (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087718
4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee American Airlines		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC		
6 Dates of Travel 10/23/2023 10/23/2023	7 Name of person(s) traveling Eli, Turner	
	8 Departure city or name of departure location Washington DC	
	9 Destination city or name of destination location Dallas Fort Worth	
10 Means of transportation Commercial Airplane	11 Purpose of travel (including name of conference, seminar, or other event) Photographer travel to Dallas for campaign photoshoot	
Name of Contributor / Corporation or Labor Organization / Pledgor /Payee American Airlines		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC		
Dates of Travel 10/25/2023 10/25/2023	Name of person(s) traveling Eli, Turner	
	Departure city or name of departure location Dallas Fort Worth	
	Destination city or name of destination location Washington DC	
Means of transportation Commercial Airplane	Purpose of travel (including name of conference, seminar, or other event) Photographer travel to Dallas for campaign photoshoot	
Name of Contributor / Corporation or Labor Organization / Pledgor /Payee American Airlines		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC		
Dates of Travel 10/23/2023 10/23/2023	Name of person(s) traveling Jeannie, Carlson	
	Departure city or name of departure location Washington DC	
	Destination city or name of destination location Dallas Fort Worth	
Means of transportation Commercial Airplane	Purpose of travel (including name of conference, seminar, or other event) Consultant travel to Dallas	

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee
American Airlines

5 Contribution / Expenditure reported on:
 Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1
 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC

6 Dates of Travel 10/25/2023 10/25/2023	7 Name of person(s) traveling Jeannie, Carlson
	8 Departure city or name of departure location Dallas Fort Worth
	9 Destination city or name of destination location Washington DC

10 Means of transportation Commercial Airplane	11 Purpose of travel (including name of conference, seminar, or other event) Consultant travel to Dallas
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Name of Contributor / Corporation or Labor Organization / Pledgor /Payee
American Airlines

Contribution / Expenditure reported on:
 Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1
 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC

Dates of Travel 08/23/2023 08/23/2023	Name of person(s) traveling McKeithen, Emily
	Departure city or name of departure location Dallas Fort Worth
	Destination city or name of destination location New York City

Means of transportation Commercial Airplane	Purpose of travel (including name of conference, seminar, or other event) Campaign fundraising event
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Name of Contributor / Corporation or Labor Organization / Pledgor /Payee
American Airlines

Contribution / Expenditure reported on:
 Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1
 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC

Dates of Travel 08/25/2023 08/25/2023	Name of person(s) traveling McKeithen, Emily
	Departure city or name of departure location New York City
	Destination city or name of destination location Dallas Fort Worth

Means of transportation Commercial Airplane	Purpose of travel (including name of conference, seminar, or other event) Campaign fundraising event
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IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee
American Airlines

5 Contribution / Expenditure reported on:

- Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1
 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC

6 Dates of Travel 08/23/2023 08/23/2023	7 Name of person(s) traveling Simon, Yasmin
	8 Departure city or name of departure location Dallas Fort Worth
	9 Destination city or name of destination location New York City

10 Means of transportation Commercial Airplane	11 Purpose of travel (including name of conference, seminar, or other event) Campaign fundraising event
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Name of Contributor / Corporation or Labor Organization / Pledgor /Payee
American Airlines

Contribution / Expenditure reported on:

- Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1
 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC

Dates of Travel 08/26/2023 08/26/2023	Name of person(s) traveling Simon, Yasmin
	Departure city or name of departure location New York City
	Destination city or name of destination location Dallas Fort Worth

Means of transportation Commercial Airplane	Purpose of travel (including name of conference, seminar, or other event) Campaign fundraising event
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