CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to comp	lete this form.	1 Filer ID (Ethics Commis 00062098		2 Total pages f	iled: 36
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDER	The Honorable	Ronald E.				
NAME		Ronald E.			Date Received	
					ELECTRONIC	ALLY FILED
	NICKNAME	LAST		SUFFIX	01/14/2024	
		Reynolds				
		-			5 · · · · · · · ·	
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; AP		ΓY;	ZIP CODE	Date Hand-delivered	or Date Postmarked
MAILING	6140 Hwy. 6 South, Ste.	233			D	
ADDRESS					Receipt #	Amount
Change of Address	Missouri City, TX 77459-	3802			Data Daaraa	
					Date Processed	
					Date Imaged	
					Date imageu	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER				IVII		
NAME		Ronald E.				
	NICKNAME	LAST		SUFFIX		
		Reynolds				
6 CAMPAIGN	STREET ADDRESS (NO PO	D BOX PLEASE);	AP	/ SUITE #; CITY;	ST	ATE; ZIP CODE
TREASURER	6140 Highway 6 South #	233				
ADDRESS						
(Residence or Business)	Miccouri City TX 77450					
	Missouri City, TX 77459					
7 CAMPAIGN	AREA CODE PHO	NE NUMBER	EXTENSION			
TREASURER	(832) 721-2667					
PHONE						
8 REPORT						
TYPE	X January 15	30th day befor	e election	Runoff	15th day after ca	ampaign treasurer
		_			appointment (off	iceholder only)
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (Att	ach C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2023	TI	HROUGH	12/31/2023	3	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	XF	Primary	Runoff	Other	
	03/05/2024		General	Special		
					(if known)	
11 OFFICE	OFFICE HELD (if any) State Representative Dis	trict 27		12 OFFICE SOUGHT State Representa		
	State Representative Dis					
		GO ⁻	TO PAGE 2			
Cormo providad by Ta	vac Ethios Commission				1/2-	cion V/2 E 1 Obtoth C7
Forms provided by Te	xas Ethics Commission	www.e	thics.state.tx.u	5	ver	sion V3.5.1.0bfcfb67

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

Reynolds, Ronald E. (The Honorable)

13 C / OH NAME

FORM C/OH COVER SHEET PG 2 2 of 86

(Ethics Commission Filers)

14 Filer ID

00062098

15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures made by political co These expenditures may have been made without the candidate's or office d officeholders are required to report this information only if they receive not	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	
		COMMITTEE ADDRESS	
	SPECIFIC		
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, ES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 29,200.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	\$ 0.00	
	4. TOTAL POLITIC	CAL EXPENDITURES	\$ 55,936.47
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE ERIOD	\$ 3,812.15
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY RTING PERIOD	\$ 20,000.00
17 AFFIDAVIT		I swear, or affirm, under penalty of perjury, that the acc true and correct and includes all information required to under Title 15, Election Code.	
		The Honorable Ronald E. Reyno	lds
		Signature of Candidate or Officehold	ler
AFFIX NO	TARY STAMP / SEAL AB	OVE	
		aid, this the ertify which, witness my hand and seal of office.	day
Signature of offic	cer administering	Printed name of officer administering Title of officer	administering oath
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us	Version V3.5.1.0bfcfb6

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 86 19 Filer ID 18 FILER NAME (Ethics Commission Filers) Reynolds, Ronald E. (The Honorable) 00062098 **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. \$ 29,200.00 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ З. 4. X SCHEDULE E: LOANS \$ 20,000.00 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 55,936.47 \$ 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 1/23 Rpt: 4/86	
2 FILER NAME		1	3 Filer ID (Ethics Commission F	-ilers)
	- Ronald E. (The Honorable)		00062098	
4 Date 10/02/2023	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	\$250.00
	6 Contributor address; City; State; Zip Code			
	Sugar Land, TX 77479			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	;)	
Attorney		Self Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/20/2023	All Type Insurance Agency LLC			\$100.00
	Contributor address; City; State; Zip Code		1	
	Houston, TX 77036	-		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
10/02/2023	Anderson, Emily			\$100.00
	Contributor address; City; State; Zip Code			
	HOUSTON, TX 77081			
	upation / Job title (See Instructions)	Employer (See Instructions	\$)	
Engineer		Halff Associates, Inc.		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/30/2023	Anderson, Katrina			\$50.00
	Contributor address; City; State; Zip Code		1	
	Missouri City, TX 77459	1		
· ·	upation / Job title (See Instructions)	Employer (See Instructions	,	
President/ E		Fort Bend Employee Fe		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/20/2023	Bartley, Shintell			\$100.00
	Contributor address; City; State; Zip Code			
	Cypress, TX 77433	i		
	upation / Job title (See Instructions)	Employer (See Instructions	3)	
N/A		N/A		

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 2/23 Rpt: 5/86
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Reynolds, Ronald E. (The Honorable)	00062098
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/14/2023 Beer Alliance of Texas PAC	\$1,000.00
6 Contributor address; City; State; Zip Code	1
Austin, TX 78701	
8 Principal occupation / Job title (See Instructions)9 Employer (See Instructions)	3)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/02/2023 Bennett, Robert	\$50.00
Contributor address; City; State; Zip Code	1
Houston, TX 77030	
Principal occupation / Job title (See Instructions) Employer (See Instructions Attorney Bennett Law Firm	5)
, 	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/02/2023 Betts, Loretta	\$25.00
Contributor address; City; State; Zip Code	
stafford, TX 77477	
Principal occupation / Job title (See Instructions) Employer (See Instructions	s)
N/A N/A	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/01/2023 Bobrick, William	\$25.00
Contributor address; City; State; Zip Code	1
Sugar Land, TX 77478	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	~
Organizer AFT of Texas	5)
	Amount of Contribution (\$)
Date Full name of contributor out-of-state PAC (ID#:) 10/31/2023 Bobrick, William	\$10.00
Contributor address; City; State; Zip Code	
Contributor address, Oity, State, Zip Code	
Sugar Land, TX 77478	
Principal occupation / Job title (See Instructions) Employer (See Instructions	s)
Organizer AFT of Texas	

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 3/23 Rpt: 6/86	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
	conald E. (The Honorable)		00062098	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
10/26/2023	Bobrick, William		\$25	.00
	6 Contributor address; City; State; Zip Code		1	
2 Dringingloggy	Sugar Land, TX 77478			
8 Principal occu Organizer	upation / Job title (See Instructions)	9 Employer (See Instructions AFT of Texas	3)	
_			1	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
08/01/2023			\$10	.00
	Contributor address; City; State; Zip Code			
	Sugar Land, TX 77478			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions		
Organizer		AFT of Texas	"	
			A request of Contribution (ft)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	00
09/07/2023			\$10	.00
	Contributor address; City; State; Zip Code			
	Sugar Land, TX 77478			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 3)	
Organizer		AFT of Texas	,	
Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>)	Amount of Contribution (\$)	
09/30/2023	Bobrick, William		\$25	5.00
	Contributor address; City; State; Zip Code		•	
	Sugar Land, TX 77478			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	\$)	
Organizer		AFT of Texas		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/02/2023	Bobrick, William		\$10	0.00
	Contributor address; City; State; Zip Code		1	
	Sugar Land, TX 77478			
	ipation / Job title (See Instructions)	Employer (See Instructions	3)	
Organizer		AFT of Texas		
		1		

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	The Instruc	ction Guide explains how to complete	e this fo	orm.	1	Total pages Schedule A1: Sch: 4/23 Rpt: 7/86	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		onald E. (The Honorable)				00062098	
4	Date	5 Full name of contributor Dut-of-state PA	AC (ID#:)	7	Amount of Contribution (\$)	
	12/13/2023	Bobrick, William					\$10.00
		6 Contributor address; City; State; Zip Code					
Ļ		Sugar Land, TX 77478			Ĺ		
8		pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Organizer			AFT of Texas	-		
	Date		AC (ID#:)		Amount of Contribution (\$)	
	09/12/2023	Boykin, Becky					\$100.00
		Contributor address; City; State; Zip Code					
	<u> </u>	Sugar Land, TX 77498	r		Ĺ		
		pation / Job title (See Instructions) r		Employer (See Instructions	5)		
	Administrato			Alief ISD	-		
	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	09/30/2023	Brewer, Marcus					\$100.00
		Contributor address; City; State; Zip Code					
		Fresno, TX 77545					
\vdash	Bringinal occu	pation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	<u> </u>		
	Fundraiser			Change Happens)		
╞					1		
	Date		AC (ID#:)		Amount of Contribution (\$)	¢100.00
	09/20/2023	Browder, Cynthia					\$100.00
		Contributor address; City; State; Zip Code					
		Fresno, TX 77545					
\vdash	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> י)		
	RN			Texas Children's Hospit			
╞)	и. Г	tt -f Ω-retribution (Φ)	
	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	Ф <u>ЭЕ</u> О ОО
	10/02/2023	Brown, Christopher					\$250.00
		Contributor address; City; State; Zip Code					
		Deer Park, TX 77536					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	Attorney			The Brown Law Group	,		
-				•			

The Instruc	ction Guide explains how to complete th	is form.	1 Total pages Schedule A1: Sch: 5/23 Rpt: 8/86
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Reynolds, Re	onald E. (The Honorable)		00062098
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of Contribution (\$)
10/02/2023	Brown, Koretta		\$50.00
	6 Contributor address; City; State; Zip Code		1
	Minoruri TV 77025		
8 Principal occu	Missouri, TX 77035 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>
Executive Di		Bridges To Empowerme	
			1
Date 09/20/2023		(ID#:)	Amount of Contribution (\$) \$50.00
09/20/2023			φου.υυ
	Contributor address; City; State; Zip Code		
	Missouri City, TX		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)
N/A	· · ·	N/A	
Date	Full name of contributor out-of-state PAC (I (ID#:)	Amount of Contribution (\$)
09/20/2023	Burley, Vivian		\$50.00
	Contributor address; City; State; Zip Code		·
	Missouri City, TX 77489		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
		retired	
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of Contribution (\$)
08/01/2023	Bylo Chacon, Jessica		
	Contributor address; City; State; Zip Code		
	Berkeley, CA 94704		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<i>د)</i>
Not Employe		Not Employed	<i>(</i>
Date	Full name of contributor out-of-state PAC (i		Amount of Contribution (\$)
09/07/2023	Bylo Chacon, Jessica	,ID#)	\$1.00
00.0	Contributor address; City; State; Zip Code		·
	Berkeley, CA 94704		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
Not Employe	ed .	Not Employed	

SCHEDULE	A1
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	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 6/23 Rpt: 9/86	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	Reynolds, R	onald E. (The Honorable)				00062098	-
4	Date	5 Full name of contributor X out-of-	f-state PAC (ID#: <u>C</u>	00002089)	7	Amount of Contribution (\$)	
	10/20/2023	CWA-COPE PAC					\$2,500.00
		6 Contributor address; City; State; Zip C	Code				
		1					
		1					
		Washington, DC 20001					
8	Principal occu	pation / Job title (See Instructions)	ę	9 Employer (See Instructions	,)		
	Date	Full name of contributor out-of-	f-state PAC (ID#:)		Amount of Contribution (\$)	
	10/02/2023	Carter, Kyle					\$250.00
		Contributor address; City; State; Zip C	;ode				
		1					
		1					
\vdash		Houston, TX 77004	r		Ĺ		
		pation / Job title (See Instructions)		Employer (See Instructions	;)		
L	Judge		<u> </u>	State of Texas	—		
	Date		f-state PAC (ID#:)		Amount of Contribution (\$)	÷100.00
	09/20/2023	Clouser, Joel (Judge)					\$100.00
		Contributor address; City; State; Zip C	ode				
		1					
		Missouri City, TX 77459					
	Principal occu	I pation / Job title (See Instructions)		Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Judge			Fort Bend County			
\vdash	Date	Full name of contributor X out-of-	f-state PAC (ID#: <u>C(</u>	00248716)	Γ	Amount of Contribution (\$)	
	09/14/2023	Comcast Corporation & NBC Unive					\$500.00
		Contributor address; City; State; Zip C					
		1					
		1					
L		Philadelphia, PA 19013					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions	;)		
╞		Full name of contributor				Amount of Contribution (¢)	
	Date 10/02/2023	Criner, Walter	f-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	10/02/2023	Contributor address; City; State; Zip C					Φ100.00
			oue				
		1					
		Houston, TX 77083					
┢	Principal occu	Ipation / Job title (See Instructions)	· · · · · · · · · · · · · · · · · · ·	Employer (See Instructions	;)		
	Sales			Criner-Daniels			
┢			•				

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/23 Rpt: 10/86	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Reynolds, R	conald E. (The Honorable)			00062098	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/19/2023	Curvey, Nathaniel				\$1,050.00
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77015				
8	Principal occu Director	upation / Job title (See Instructions)	9 Employer (See Instructions) Accurate Security Inc.)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/20/2023	Danburg, Debra				\$100.00
		Contributor address; City; State; Zip Code				
		Auston, TX 78704				
⊢	Principal Occi	Auston, TX 78704 upation / Job title (See Instructions)	Employer (See Instructions)	<u></u>		
	N/A		N/A)		
╞	Date	Full name of contributor Out-of-state PAC (ID#:		_	Amount of Contribution (\$)	
	10/02/2023	Full name of contributor out-of-state PAC (ID#: Davis, Dannette	/			\$250.00
		Contributor address; City; State; Zip Code				ΨΔΟΟ
		Pearland, TX 77581				
		upation / Job title (See Instructions)	Employer (See Instructions))		
	Principal		Kay Davis Association			
\square	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/02/2023	Davis, Pernell				\$50.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77027				
┢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))		
	N/A		N/A	,		
⊨	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/12/2023	Davis, Sharon	/		, intouri or e e	\$250.00
		Contributor address; City; State; Zip Code				
L		Missouri City, TX 77489				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))		
L			Retired			

	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 8/23 Rpt: 11/86
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Reynolds, R	onald E. (The Honorable)		00062098
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	10/02/2023	Dunbar, Cheryl		\$50.00
		6 Contributor address; City; State; Zip Code		1
_		Pearland, TX 77584		
8	Principal occu Registered N		9 Employer (See Instructions Houston Methodist Hosp	
L	_			
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/16/2023	Ellis, Donna		\$50.00
		Contributor address; City; State; Zip Code		
		Sugar Land, TX 77498		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
	N/A		N/A	<i>י</i>
╞	-			Amount of Contribution (\$)
	Date 09/30/2023	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$) \$100.00
	09/30/2020	Ellis, Donna		φ±00.00
		Contributor address; City; State; Zip Code		
		Sugar Land, TX 77498		
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)
	N/A		N/A	, ,
⊨	Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/02/2023	Evans, Carl		\$25.00
		Contributor address; City; State; Zip Code		
		Houston, TX 77005		
\square	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	\$)
	RSE	,	United	
F	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/20/2023	Fort Bend United		\$500.00
		Contributor address; City; State; Zip Code		
L		Houston, TX 77242		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)
Γ				

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TI	he Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 9/23 Rpt: 12/86	
2 FI	ILER NAME			3	Filer ID (Ethics Commission	ו Filers)
		onald E. (The Honorable)			00062098	
4 Da	ate	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
10	0/02/2023	Garner, Debra				\$50.00
	I	6 Contributor address; City; State; Zip Code		1		
		1	1			
			1			
		Richmond, TX 77469				
			9 Employer (See Instructions)	3)		
No	ot Employe	.d	Not Employed			
Da	ate	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
09	9/14/2023	HOMEPAC of Texas - Texas Association of Build				\$250.00
	I	Contributor address; City; State; Zip Code		1		
		1				
		1	1			
		Austin, TX 78701				
Pr	incipal occu	pation / Job title (See Instructions)	Employer (See Instructions)	3)		
			l			
Da	ate	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
09	9/20/2023	Harris, Judy	1			\$25.00
	I	Contributor address; City; State; Zip Code		1		
			1			
			!			
		Richmond, TX 77469	!			
Pr	incipal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
No	ot Employe	:d	Not Employed			
Da	ate	Full name of contributor out-of-state PAC (ID#:) !	Γ	Amount of Contribution (\$)	
10	0/02/2023	Hebron, Duni	I			\$250.00
1	I	Contributor address; City; State; Zip Code		1		
1			1			
1		1	1			
1		Pearland, TX 77584	1			
Pr	rincipal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
Se	elf Employe	ed	N/A			
Da	ate	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
05	9/20/2023	Herrington, Katie				\$250.00
1	I	Contributor address; City; State; Zip Code		1		
1			1			
		1	1			
1		Missouri City, TX 77459	1			
Pr	rincipal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
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1						

The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 10/23 Rpt: 13/86	
2 FILER NAME			3 Filer ID (Ethics Commission	ו Filers)
	Ronald E. (The Honorable)		00062098	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
09/20/2023				\$50.00
	6 Contributor address; City; State; Zip Code			
	Missouri City, TX			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	;)	
N/A		N/A		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/16/2023	Holland, Ava			\$250.00
	Contributor address; City; State; Zip Code			
	Missouri City, TX 77489			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)	
Not Employe	ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/16/2023	Independent Bankers of Texas PAC			\$500.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78701			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/02/2023	Johnson, Barbara C			\$100.00
	Contributor address; City; State; Zip Code			
	MISSOURI CITY, TX 77489			
	upation / Job title (See Instructions)	Employer (See Instructions)		
Not Employe	ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
10/02/2023	Johnson, Carlene			\$100.00
	Contributor address; City; State; Zip Code			
	Fresno, TX 77545			
	upation / Job title (See Instructions)	Employer (See Instructions)		
REAL ESTA	.те	Self		

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The Instruc	ction Guide explains how to complete this f	1 Total pages Schedule A1: Sch: 11/23 Rpt: 14/86		
2 FILER NAME			3 Filer ID (Ethics Commission F	Filers)
	onald E. (The Honorable)		00062098	liore,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
09/12/2023	Jones, April			\$150.00
1	6 Contributor address; City; State; Zip Code			
	Houston, TX 77083			
	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
Business Ow	vner	AL Jones Contracting Co	onsulting Services, LLC.	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/01/2023	Jones, Errol			\$15.00
	Contributor address; City; State; Zip Code			
	Espanola, NM 87532			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u>)</u>	
Teacher		LAPS)	
		1		
Date)	Amount of Contribution (\$)	
10/31/2023	Jones, Errol			\$15.00
I	Contributor address; City; State; Zip Code			
I				
I	Espanola, NM 87532			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
Teacher		LAPS		
Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
08/01/2023	Full name of contributor out-of-state PAC (ID#: Jones, Errol	/		\$15.00
00/01/2020				ΦΤΩ'ΩΩ
	Contributor address; City; State; Zip Code			
	Espanola, NM 87532			
	pation / Job title (See Instructions)	Employer (See Instructions))	
Teacher		LAPS		
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Amount of Contribution (\$)	
09/07/2023	Jones, Errol			\$15.00
	Contributor address; City; State; Zip Code			
	Espanola, NM 87532			
Dringing occu		Employer (See Instructions)	<u> </u>	
	pation / Job title (See Instructions)	Employer (See Instructions))	
Teacher		LAPS		
1				

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 12/23 Rpt: 15/86	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Reynolds, R	onald E. (The Honorable)			00062098	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/02/2023	Jones, Errol				\$15.00
		6 Contributor address; City; State; Zip Code				
L		Espanola, NM 87532				
8	Principal occu Teacher	pation / Job title (See Instructions)	9 Employer (See Instructions) LAPS	.)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/20/2023	Kalaga, Sharat				\$1,000.00
		Contributor address; City; State; Zip Code				
		1				
		Sugarland, TX 77479				
		pation / Job title (See Instructions)	Employer (See Instructions)	;)		
	N/A		N/A			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/20/2023	Landers, Daniella				\$250.00
		Contributor address; City; State; Zip Code				
\vdash		Pearland, TX 77584		Ļ		
	Principal occu N/A	pation / Job title (See Instructions)	Employer (See Instructions))		
L			IV/A	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	÷050.00
	10/02/2023	Lange, Michael				\$250.00
		Contributor address; City; State; Zip Code				
		1				
		Houston, TX 77096				
		pation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Project Rese	arch	Ariel Equities			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/22/2023	Leaders Esteem University				\$100.00
		Contributor address; City; State; Zip Code				
		1				
		Spring, TX 77388				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
⊢						

	The Instru	ction Guide explains how to complete	1	Total pages Schedule A1: Sch: 13/23 Rpt: 16/86			
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)	
		Ronald E. (The Honorable)				00062098	
4	Date		PAC (ID#:)	7	Amount of Contribution (\$)	
	09/12/2023	Lester, James					\$50.00
		6 Contributor address; City; State; Zip Code			1		
		Dallas, TX 75236					
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	RN			UTSW			
F	Date	Full name of contributor out-of-state PA	 PAC (ID#:)		Amount of Contribution (\$)	
	09/14/2023	Linebarger Goggan Blair & Sampson, LL					\$500.00
		Contributor address; City; State; Zip Code					
		Austin, TX 78760					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PA	 PAC (ID#:)		Amount of Contribution (\$)	
	10/02/2023	Love, Jerome	` <u> </u>			· · ·	\$500.00
		Houston, TX 77045					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	5)		
	Developer			JDL Homes			
╞	Date	Full name of contributor out-of-state PA	 PAC (ID#:)		Amount of Contribution (\$)	
	09/12/2023	Lundy, Hazel	` <u> </u>			· · ·	\$50.00
		Contributor address; City; State; Zip Code					
		Missouri City, TX 77459					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	5)		
	retired						
	Date	Full name of contributor out-of-state PA	 PAC (ID#:)		Amount of Contribution (\$)	
	11/25/2023	Maguire-Powell, Alison	· -				\$10.00
		Contributor address; City; State; Zip Code					
		Denton, TX 76210					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	 ;)		
	Not Employe	ed		Not Employed			
			I				

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 14/23 Rpt: 17/86	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
	conald E. (The Honorable)		00062098	0.2,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
11/05/2023	Maguire-Powell, Alison		4	\$10.00
	6 Contributor address; City; State; Zip Code			
	Denton, TX 76210			
	ipation / Job title (See Instructions)	9 Employer (See Instructions))	
Not Employe	ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/12/2023	Maguire-Powell, Alison		9	\$10.00
	Contributor address; City; State; Zip Code			
	Denton, TX 76210			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions))	
Not Employe	ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/08/2023	Maguire-Powell, Alison		\$	\$10.00
	Contributor address; City; State; Zip Code			
	Denton, TX 76210			
	upation / Job title (See Instructions)	Employer (See Instructions))	
Not Employe	ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/12/2023	Maguire-Powell, Alison		\$	\$10.00
	Contributor address; City; State; Zip Code			
	Dester TV 70210			
	Denton, TX 76210		<u> </u>	
	upation / Job title (See Instructions)	Employer (See Instructions))	
Not Employe		Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/15/2023	Maguire-Powell, Alison		9	\$10.00
	Contributor address; City; State; Zip Code			
	Deston TV 76910			
D in single age	Denton, TX 76210		、	
	upation / Job title (See Instructions)	Employer (See Instructions))	
Not Employe		Not Employed		

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 15/23 Rpt: 18/86
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Reynolds, Ronald E. (The Honorable)	00062098
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/20/2023 McBride, Vickie	\$50.00
6 Contributor address; City; State; Zip Code	1
Missouri City, TX 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	~
 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) N/A 	5)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/30/2023 McKee, Kenneth	\$50.00
Contributor address; City; State; Zip Code	
Pearland, TX 77584	
Principal occupation / Job title (See Instructions) Employer (See Instructions	5)
retired retired	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/02/2023 Murray, Arnetta	\$10.00
Contributor address; City; State; Zip Code	
Rosharion, TX 77583	
Principal occupation / Job title (See Instructions) Employer (See Instructions	5)
Teacher Hisd	
Date Full name of contributor X out-of-state PAC (ID#: C00366559)	Amount of Contribution (\$)
09/14/2023 NRG Energy PAC	\$1,000.00
Contributor address; City; State; Zip Code	
Princeton, NJ 08540	
Principal occupation / Job title (See Instructions) Employer (See Instructions	s)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/20/2023 Nyofu, Mshinda	\$100.00
Contributor address; City; State; Zip Code	
Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Employer (See Instructions	5)
Educator Univ. of Houston	

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 16/23 Rpt: 19/86
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Reynolds, Ronald E. (The Honorable)	00062098
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7	7 Amount of Contribution (\$)
09/20/2023 Okeke, Edna	\$50.00
6 Contributor address; City; State; Zip Code	
Missouri City, TX	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/31/2023 Our Revolution Brazoria County	\$643.00
Contributor address; City; State; Zip Code	
Pearland, TX 77584	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
Date Full name of contributor out-of-state PAC (ID#:) 10/02/2023 Parker, LaDonna	\$500.00 \$500.00
Contributor address; City; State; Zip Code	4000.00
Contributor address, City, State, Zip Code	
Missouri City, TX 77459	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Realtor Self	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/16/2023 Peters, Evelyn	\$50.00
Contributor address; City; State; Zip Code	
Houston, TX 77271	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	1
	mily and Protective Services
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/20/2023 Pierre, Jacquelyn	\$100.00
Contributor address; City; State; Zip Code	
Houston, TX 77081	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
N/A N/A	

The Instru	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 17/23 Rpt: 20/86	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
	Ronald E. (The Honorable)		00062098	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
09/20/2023	Plumbers Local Union No. 68			\$1,500.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77249-8746			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	\$)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/12/2023	Prestage, Grady			\$1,000.00
	Contributor address; City; State; Zip Code			
	Missouri City, TX 77459-0835			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	\$)	
County Com	imissioner	Fort Bend County		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
10/02/2023	Ravin-Anderson, Angela	_		\$50.00
	Contributor address; City; State; Zip Code			
	Pearland, TX 77584			
	upation / Job title (See Instructions)	Employer (See Instructions)	;)	
N/A		N/A		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/30/2023	Reddix, Lynette			\$50.00
	Contributor address; City; State; Zip Code			
	Richmond, TX 77469			
	upation / Job title (See Instructions)	Employer (See Instructions)	\$)	
Self Employe	ed	Rosenberg CMHC Inc		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/26/2023	Reece, Cynthia			\$230.00
	Contributor address; City; State; Zip Code			
	ТХ			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	\$)	
N/A		N/A		
		<u>I</u>		

	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 18/23 Rpt: 21/86	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Reynolds, R	onald E. (The Honorable)			00062098	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/20/2023	Reed, Eva				\$100.00
		6 Contributor address; City; State; Zip Code				
		Missouri City, TX 77459				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	.		
	N/A		N/A			
⊢	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/08/2023	Reynolds, Lacey	/		· · · · · · · · · · · · · · · · · · ·	\$100.00
	• • • • •					T '
		ТХ				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	L;)		
⊨	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/30/2023	Richie, Carl				\$500.00
		San Antonio, TX 78239				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Self Employed			
╞	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/20/2023	Rodney Ellis Campaign				\$1,000.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77005				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/12/2023	Russell, Dylan				\$50.00
		Contributor address; City; State; Zip Code				
		Missouri, TX 77459				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Hoover Slovacek LLP			
1						

The Instru	ction Guide explains how to complete this	1 Total pages Schedule A1: Sch: 19/23 Rpt: 22/86	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Reynolds, R	onald E. (The Honorable)		00062098
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of Contribution (\$)	
10/02/2023	Russell, Dylan		\$100.
	6 Contributor address; City; State; Zip Code		
	Missouri, TX 77459		
	upation / Job title (See Instructions)	9 Employer (See Instructions	us)
Attorney		Hoover Slovacek LLP	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/02/2023	Sanders, Vincent		\$50.
	Contributor address; City; State; Zip Code		
	ТХ		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	is)
Systems Pla	anner	Houston METRO	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/20/2023	Sewell, Shirley		\$100.
	Contributor address; City; State; Zip Code		
	Missouri City, TX 77459	1	
	ipation / Job title (See Instructions)	Employer (See Instructions	is)
Not Employe	ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/20/2023	Singleton, Vivian		\$25.
	Contributor address; City; State; Zip Code		
	Niesowi City TY		
Driveire Less	Missouri City, TX		
Principal occu N/A	ipation / Job title (See Instructions)	Employer (See Instructions	IS)
N/A		N/A	1
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/02/2023	Smith, Louis		\$250.
	Contributor address; City; State; Zip Code		
	Missouri City TX 77490		
Drincipal acc	Missouri City, TX 77489	Employor (See Instruction	(20)
Principal occu N/A	ipation / Job title (See Instructions)	Employer (See Instructions	5)

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 20/23 Rpt: 23/86
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	onald E. (The Honorable)		00062098
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/20/2023	Sonny Colunga for Sheriff Campaign		\$500.0
	6 Contributor address; City; State; Zip Code		
	Needville , TX 77461		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/16/2023	Sorola-Pohlman, Lenora		\$50.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77008		
	pation / Job title (See Instructions)	Employer (See Instructions)	
Ins Broker		Sorola Ins., Services LL	C
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/20/2023	Spears, Alice		\$50.00
1	Contributor address; City; State; Zip Code		1
Principal occu	Missouri City, TX 77489 pation / Job title (See Instructions)	Employer (See Instructions	
N/A		N/A)
			Amount of Contribution (\$)
Date 10/02/2023	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$) \$500.00
10/02/2023	Sreerama, Karun		φουυ.υ
	Contributor address; City; State; Zip Code		
	Houston , TX 77059		
· · ·	pation / Job title (See Instructions)	Employer (See Instructions)	•
Engineers		Concept Engineers, Inc.	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/05/2023	T.I.U.A School of Business		\$200.00
	Contributor address; City; State; Zip Code		
	Duluth , TX 30097		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)
		<u> </u>	

	The Instru	ction Guide explains how	orm.	1	Total pages Schedule A1: Sch: 21/23 Rpt: 24/86		
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)	
	Reynolds, R	onald E. (The Honorable)				00062098	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	09/14/2023	3 TEXPAC - Texas Medical Assoc PAC					\$250.00
		6 Contributor address; City; St	ate; Zip Code		1		
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions		9 Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	09/16/2023	Taylor, Cheryl		/			\$25.00
		Contributor address; City; St					
		Richmond, TX 77407					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	d		Not Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/14/2023	Texas Farm Bureau	—				\$1,000.00
		Contributor address; City; St	ate; Zip Code				
		Waco, TX 76702					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
					_		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/14/2023	Texas Trial Lawyers Asso					\$2,500.00
		Contributor address; City; St	ate; Zip Code				
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions	.)	Employer (See Instructions	<u> </u> 5)		
	·	, , , , , , , , , , , , , , , , , , ,	,		,		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/16/2023	Thomas, Phyllis					\$50.00
	Contributor address; City; State; Zip Code						
		Houston, TX 77047					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	N/A			N/A			
				-			

				T ₁	Total pages Schedule A1:	
	The Instrue	ction Guide explains how to complete this f	ľ	Sch: 22/23 Rpt: 25/86		
2	FILER NAME		1	3	Filer ID (Ethics Commissio	on Filers)
	Reynolds, R	onald E. (The Honorable)		00062098		
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	09/12/2023	Tucker, Clayton				\$50.00
	ł	6 Contributor address; City; State; Zip Code		1		
	1					
	1					
		Lampasas, TX 76550				
8		upation / Job title (See Instructions)	9 Employer (See Instructions)	s)		
	Program Ass	sociate	Trade Justice Ed Fund			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	11/09/2023	Vistra Employee PAC of Vistra Corp.				\$1,000.00
	ļ	Contributor address; City; State; Zip Code		1		ļ
	ł					ļ
	ļ		ļ			
	1	Irving, TX 75039				
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions)	 s)		
	•	· ·				
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/20/2023	Vyas, Chetan			· · · · · · · · · · · · · · · · · · ·	\$500.00
		Contributor address; City; State; Zip Code		-		
	ļ		ļ			
	ł					
	ļ	Katy, TX 77494	ļ			
	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
	N/A	· ·	N/A			
⊨	Date	Full name of contributor out-of-state PAC (ID#:		┯	Amount of Contribution (\$)	
	09/20/2023	Walker, Beverley	,			\$150.00
	00/20/2020					Ψ100.00
	1	Contributor address; City; State; Zip Code				
	1					
	ł	Houston, TX 77277				
⊢	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
	-	ounty District Clerk	Fort Bend			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	┮	Amount of Contribution (\$)	
	09/14/2023	Wholesale Beer Distributors of TX PAC	,			\$1,000.00
	00/19/2020					Ψ1,000.00
	1	Contributor address; City; State; Zip Code				
	1					
	ł	Austin, TX 78701				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	<u>د</u> ا ا		
	Philopa occu			5)		
⊢			<u> </u>			
١						

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 23/23 Rpt: 26/86 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Reynolds, Ronald E. (The Honorable) 00062098 5 Full name of contributor Amount of Contribution (\$) 4 Date out-of-state PAC (ID#: 7 09/30/2023 \$500.00 Wilson, Gerald 6 Contributor address; City; State; Zip Code Katy, TX 77450 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) CARDINAL MEMORIAL ACQUISITION COMPANY President Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 09/20/2023 \$30.00 Woodward, DeLois Contributor address; City; State; Zip Code Missouri City, TX Principal occupation / Job title (See Instructions) Employer (See Instructions)

LOANS					SCHEDULE E
The Instructio	on Guide explains how to c	complete this f	form.		ages Schedule E: /2 Rpt: 27/86
2 FILER NAME Reynolds, Ronal	(Ethics Commission Filers) 098				
⁴ TOTAL OF UN	IITEMIZED LOANS				\$
5 Date of loan 09/07/2023	7 Name of lender REYNOLDS, RON (Rep.)	out-of-state PA	AC (ID#:)	9 Loan Amount (\$) \$5,000.00
6 Is lender a financial institution?	8 Lender address; City;	State;	Zip Code		10 Interest Rate
No	Missouri city, TX 77459				11 Maturity Date
12 Principal occupation State Represent	on / Job title (See Instructions) ative		13 Employer (See Instruction State of Texas	าร)	
14 Description of Coll X None	ateral		15 Check if personal funds w	vere deposited	d into political account (See Instructions)
16 GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)
X not applicable	18 Guarantor address; City;	State;	Zip Code		
20 Principal occupatio	n		21 Employer (See Instruction	าร)	
Date of loan	Name of lender	out-of-state PA	AC (ID#:)	Loan Amount (\$)
11/25/2023	REYNOLDS, RON (Rep.)				\$5,000.00
Is lender a financial institution?	Lender address; City;	State;	Zip Code		Interest Rate
No	Missouri city, TX 77459				Maturity Date
Principal occupation State Represent	on / Job title (See Instructions) ative		Employer (See Instruction State of Texas	าร)	
Description of Coll	ateral		Check if personal funds w	vere deposited	d into political account (See Instructions)
GUARANTOR INFORMATION	Name of guarantor				Amount Guaranteed (\$)
X not applicable	Guarantor address; City;	State;	Zip Code		
Principal occupatio)n		Employer (See Instruction	าร)	

LOANS					SCHEDULE E
The Instructio	on Guide explains how to c	complete this f	form.	-	iges Schedule E: 2 Rpt: 28/86
2 FILER NAME Reynolds, Ronal	(Ethics Commission Filers) 098				
⁴ TOTAL OF UN	IITEMIZED LOANS				\$
5 Date of loan 12/15/2023	7 Name of lender REYNOLDS, RON (Rep.)	out-of-state PA	AC (ID#:)	9 Loan Amount (\$) \$5,000.00
6 Is lender a financial institution?	8 Lender address; City;	State;	Zip Code		10 Interest Rate
No	Missouri city, TX 77459				11 Maturity Date
12 Principal occupation State Represent	on / Job title (See Instructions) ative		13 Employer (See Instruction State of Texas	is)	
14 Description of Colla X None	ateral		15 Check if personal funds w	ere deposited	t into political account (See Instructions)
16 GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)
X not applicable	18 Guarantor address; City;	State;	Zip Code		1
20 Principal occupatio)n		21 Employer (See Instruction	is)	·
Date of loan	Name of lender	out-of-state PA	AC (ID#:)	Loan Amount (\$)
11/10/2023	REYNOLDS, RON (Rep.)	Stata	7:- 0040		\$5,000.00
Is lender a financial institution?	Lender address; City;	State;	Zip Code		Interest Rate
No	Missouri city, TX 77459		1		Maturity Date
State Represent			Employer (See Instruction State of Texas	-	
Description of Colla	ateral		Check if personal funds w	ere deposited	d into political account (See Instructions)
GUARANTOR INFORMATION	Name of guarantor				Amount Guaranteed (\$)
X not applicable	Guarantor address; City;	State;	Zip Code		1
Principal occupatio	חנ		Employer (See Instruction	IS)	<u> </u>

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:		Filer ID (Ethics Commission Filers)					
	Sch: 1/57 Rpt: 29/86	Reynolds, Ronald E. (The Honorable)	00062098					
4	Date 09/21/2023	5 Payee name 100 Black Men of Houston						
6	Amount (\$) \$2,152.60	7 Payee address; City; State; Zip Code PO Box 604 Bellaire, GA 77402						
8	PURPOSE OF EXPENDITURE		ide of Texas. Complete Schedule T. , officeholder living expense hip					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	07/19/2023	7-Eleven						
	Amount (\$) \$75.19	Payee address; City; State; Zip Code 1111 Lake Olympia Parkway						
	PURPOSE OF EXPENDITURE		ide of Texas. Complete Schedule T. , officeholder living expense NGS					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	09/14/2023	832 Congress Parking						
	Amount (\$) \$30.31	Payee address; City; State; Zip Code 910 Brazos St						
		Austin, TX 78701						
	PURPOSE OF EXPENDITURE		ide of Texas. Complete Schedule T. , officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					

			EXPENDITURE CATEGOR	RIES FOF	R BO	X 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Co Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains F	Office Ove Polling Exp Printing Ex Salaries/W	rhead pense pense ages/	e 'Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schodula E1	5		1000 10 00.	libic		3	Eller ID (Ethics Commission Eilers)
1	Total pages Schedule F1: Sch: 2/57 Rpt: 30/86		Reynolds, Ronald E. (The Honorable)				3	Filer ID (Ethics Commission Filers) 00062098 (Ethics Commission Filers)
4	Date	5	Payee name					
	10/17/2023		APRI					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de			
	\$350.00		815 16th Street, N.W., 4th Floor					
			Washington, DC 20006					
8	PURPOSE		-		(h)	Description		
0	OF	(a)	Category (See Categories listed at the top of this sche Contributions/Donations Made By	edule)	(D)	Description	outsi	de of Texas. Complete Schedule T.
	EXPENDITURE		Candidate/Officeholder/Political Comm	ittee				officeholder living expense
						Donation		
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght			Office held
	Date		Payee name					
	12/07/2023		Academy Awards					
	Amount (\$)		-	Zip Co	do			
					ue			
\$534.00 830 Majestic St								
			Houston, TX 77020					
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description		
	OF EXPENDITURE		Gift/Awards/Memorials Expense					de of Texas. Complete Schedule T.
								officeholder living expense
						Campaign ma	atei	nais
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght			Office held
	Date		Payee name					
	12/31/2023		Act Blue					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$298.12		PO Box 441146	•				
			Somerville, MA 02144					
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description		
	OF EXPENDITURE		Fees					de of Texas. Complete Schedule T.
								officeholder living expense
						Merchant Fee	5	
	0							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght			Office held

			EXPENDITURE CATEGO	ORIES FO	R BO	DX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office Ov Polling E Printing E Salaries/	verhea xpens Expens Wages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 3/57 Rpt: 31/86		Reynolds, Ronald E. (The Honorable))				00062098	
4	Date 08/08/2023		Payee name Ambition Strategies						
6	Amount (\$) \$651.00								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign consulting							officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ught			Office held	
	Date		Payee name						
	07/05/2023		American Car						
	Amount (\$) \$527.00		Payee address; City; Stat	e; Zip Co	ode				
			Austin, TX						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this se Travel Out of District	chedule)	(b)		, тх,	de of Texas. Complete Schedule T. officeholder living expense trict	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ught			Office held	
	Date		Payee name						
	09/07/2023		American Car						
	Amount (\$) \$1,000.00		Payee address; City; Stat	e; Zip Co	ode				
			ТХ		-				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so Travel Out of District	chedule)	(b)		, тх,	de of Texas. Complete Schedule T. officeholder living expense trict	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name	Office sou	ught			Office held	

			EXPE	NDITURE CATEGO	RIES FOR	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	- Commit	Gift/Awards tee Legal Serv	rage Expense s/Memorials Expense	Office Over Polling Exp Printing Ex Salaries/Wa	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FIL	ER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 4/57 Rpt: 32/86	Re	eynolds, Ronald E	E. (The Honorable)				00062098
4	Date 10/28/2023		yee name nerican Car					
6	Amount (\$) \$520.00	7 Pa	yee address; C	City; State	e; Zip Coo	le		
		Но	ouston, TX					
8	PURPOSE OF EXPENDITURE		tegory _{(See Categoria} avel Out of Distric	es listed at the top of this sc Ct	hedule)		n, TX,	de of Texas. Complete Schedule T. officeholder living expense trict
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		didate/Officeholder	name	Office soug	ht		Office held
	Date	Pa	yee name					
	10/12/2023	Ar	in Williams Camp	aign				
	Amount (\$) \$500.00		-	Sity; State	e; Zip Coo	le		
	PURPOSE OF EXPENDITURE	(a) Ca	ontributions/Dona	es listed at the top of this sc tions Made By Ider/Political Comr				de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		didate/Officeholder	name	Office soug	ht		Office held
	Date	Pa	yee name					
	10/03/2023		ede Real Estate					
	Amount (\$) \$150.00	Pa	yee address; C	City; State	e; Zip Coo	le		
		Но	ouston , TX					
	PURPOSE OF EXPENDITURE		tegory _{(See Categori} fice Overhead/Re	es listed at the top of this sc ental Expense	hedule)		ı, TX,	de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		didate/Officeholder	name	Office soug	ht		Office held

			EXPENDITURE	CATEGOF	RIES FOR	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp nmittee Legal Services The Instruction Guid		Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2					3	Filer ID (Ethics Commission Filers)
1	Sch: 5/57 Rpt: 33/86	2	Reynolds, Ronald E. (The Ho	norable)			3	00062098
4	Date	5	Payee name					
	12/07/2023		Aoede Real Estate					
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coc	le		
	\$150.00							
			тх					
8	PURPOSE	(a)	Catagon			(b) Description		
ľ	OF	(")	Category (See Categories listed at the t Event Expense	top of this sche	iedule)		outs	ide of Texas. Complete Schedule T.
	EXPENDITURE							, officeholder living expense
						Campaign ev	/en	t space rental
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Office soug	ht		Office held
	Date		Payee name					
	11/20/2023		Best Western					
_	Amount (\$)		Payee address; City;	State:	; Zip Coc	le		
	\$320.00		2200 S I H	,	,			
	\$020.00		2200 0 111					
			Austin , TX 78704					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the t Travel Out of District	top of this sche	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense trict
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held
	Date		Payee name					
	08/23/2023		Bobby Guerra Campaign					
	Amount (\$)		Payee address; City;	State:	; Zip Coc	le		
	\$41.77			otato,	, בוף סטנ			
			McAllen, TX					
	PURPOSE	(a)	Category (See Categories listed at the t	top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Contributions/Donations Made	е Ву				ide of Texas. Complete Schedule T.
			Candidate/Officeholder/Politic	al Comm	nittee		ı, TX	, officeholder living expense
						Contribution		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held

			EXPENDITURE CAT	EGOF	RIES FOR	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mittee Legal Services The Instruction Guide ex		Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor	e	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2				•	3	3 Filer ID (Ethics Commission Filers)
-	Sch: 6/57 Rpt: 34/86		Reynolds, Ronald E. (The Honora	able)				00062098
4	Date	5	Payee name					
	10/04/2023		Browder, D'Yonna					
6	Amount (\$) \$800.00		Payee address; City; Houston, TX 77489	State;	; Zip Coc	le		
_	BUBBAAS							
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of Consulting Expense	this sch	edule)		avel out: ustin, TX	utside of Texas. Complete Schedule T. TX, officeholder living expense ISUIting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held
	Date		Payee name					
	07/27/2023		CBCF					
	Amount (\$)		Payee address; City;	State;	; Zip Coc	le		
	\$200.00		1720 Massachusetts Ave Washington, DC 20002					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of Contributions/Donations Made By Candidate/Officeholder/Political C	/	,		avel out: ustin, TX	utside of Texas. Complete Schedule T. TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held
	Date		Payee name					
	10/14/2023		Carl Sherman for Texas					
	Amount (\$) \$1,000.00		Payee address; City; 1670 N. Hampton Road, Ste 106	State;	; Zip Coc	le		
			DeSoto, TX 75115					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of Contributions/Donations Made By Candidate/Officeholder/Political C	/	iouulo)		avel out: ustin, TX	utside of Texas. Complete Schedule T. TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Glf/Awards/Memorials Expense Printing Expense Travel Out of District I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)						
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
Sch: 7/57 Rpt: 35/86	Reynolds, Ronald E. (The Honorable) 00062098						
4 Date	5 Payee name						
11/09/2023	Carolyn Evans-Shabazz Campaign						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$500.00							
	Houston, TX						
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
EXPENDITURE	Contributions/Donations Made By						
	Candidate/Officeholder/Political Committee						
	Contribution						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
11/17/2023	Casa Chapala						
Amount (\$)	Payee address; City; State; Zip Code						
\$82.21	9041 Research Blvd						
	#100						
	Austin, TX 78759						
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
	Food for campaign volunteers						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OI							
Dete							
Date	Payee name						
10/06/2023	Change CDC						
Amount (\$)	Payee address; City; State; Zip Code						
\$2,500.00	3353 Elgin St 3rd Floor						
	Houston, TX 77004						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF	Contributions/Donations Made By						
EXPENDITURE	Candidate/Officeholder/Political Committee						
	Donation						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OI	4						

		EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimt Fees Office Overhead/Rental Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract The Instruction Guide explains how to complete this	Expense Transportation Equipment & Related Expense Travel in District Travel Out of District t Labor OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	· · ·	3 Filer ID (Ethics Commission Filers)				
1	Sch: 8/57 Rpt: 36/86	Reynolds, Ronald E. (The Honorable)	00062098				
4	Date	Payee name					
	12/15/2023	Checkout gas station					
6	Amount (\$) \$78.98	Payee address; City; State; Zip Code Sugar Land , TX					
_	DUDDOCE	-					
8	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description (b) Description Check if travel outside of Texas. Complete Schedule T. (c) Check if Austin, TX, officeholder living expense Travel for meetings						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	07/27/2023	Chevron					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$82.00	503 Texas Parkway Missouri City , TX 77459					
	PURPOSE OF EXPENDITURE		ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense el for meetings				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	08/05/2023	Chevron					
	Amount (\$) \$70.50	Payee address; City; State; Zip Code 503 Texas Parkway					
		Missouri City , TX 77459					
	PURPOSE OF EXPENDITURE		ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense el for meetings				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

		EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food Gift/A nmittee Legal	t Expense /Beverage Expense wards/Memorials Exp Services Instruction Guide		Office Over Polling Exp Printing Ex Salaries/W	ense ages/Contract L	pense abor	Tran Trav Trav	el in District el Out of Dis	quipmen strict	Expense It & Related Exp 7 not listed above	
1	Total pages Schedule F1:	2					· · ·	3	B File	r ID	(Ethic	s Commissior	n Filers)
-	Sch: 9/57 Rpt: 37/86	-	Reynolds, Rona	ld E. (The Hor	norable))62098	(=		11 110.07
4	Date 08/14/2023	5	Payee name Chevron										
6 Amount (\$) 7 Payee address; City; State; Zip Code \$88.43 503 Texas Parkway Missouri City , TX 77459													
OF Travel In District						Check	tion k if travel out k if Austin, Ti for meet	X, office		•			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeho	lder name	0	Office sou	ht			Office he	eld		
	Date		Payee name										
	08/20/2023		Chevron										
	Amount (\$)		Payee address;	City;	State;	Zip Co	le						
	\$82.53		503 Texas Park Missouri City , 1	-		-							
	PURPOSE OF EXPENDITURE	(a)	Category _{(See Cat} Travel In Distric		op of this sche	edule)	Check	tion k if travel out k if Austin, T for meet	X, office				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeho	lder name	0	Office sou	ht			Office he	eld		
	Date		Payee name										
	08/30/2023		Chevron										
	Amount (\$) \$67.25		Payee address; 503 Texas Park	City; way	State;	Zip Coo	le						
			Missouri City , 1	X 77459									
	PURPOSE OF EXPENDITURE	(a)	Category (See Cat Travel In Distric		op of this sche	edule)	Check	tion k if travel out k if Austin, Ti for meet	X, office				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeho	lder name	0	Office sou	ht			Office he	eld		

			EXPE	NDITURE CATEGOR	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards nmittee Legal Servi	age Expense /Memorials Expense	Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2		· · · ·		-	3	Filer ID (Ethics Commission Filers)	
_	Sch: 10/57 Rpt: 38/86		Reynolds, Ronald E	. (The Honorable)				00062098	
4	Date	5	Payee name						
	10/11/2023		Chevron						
6	Amount (\$)	7	Payee address; C	ity; State;	Zip Coo	le			
	\$50.00		503 Texas Parkway						
			Missouri City , TX 7	7459					
8	PURPOSE	(a)	_			(b) Departmention			
0	OF	(a)	Category (See Categorie Travel In District	s listed at the top of this sche	edule)	b) Description	outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE		Havel III District					, officeholder living expense	
						Travel for me	eetii	ngs	
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder	name O	Office soug	ht		Office held	
	Date		Payee name						
	11/11/2023		Chevron						
	Amount (\$)		Payee address; C	ity; State;	Zip Coo	le			
	\$78.15		503 Texas Parkway		2.0 000				
	φ/0.15		505 10,431 41,004						
			Missouri City , TX 7	7459					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categorie Travel In District	s listed at the top of this sche	edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense NGS	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder	name O)ffice soug	ht		Office held	
	Date		Payee name						
	11/16/2023		Chevron						
	Amount (\$)			ity; State;	Zip Coo				
	\$50.12		503 Texas Parkway		210 000				
	\$J0.12		JUJ TEXAS FAIRWAY						
			Missouri City , TX 7	7459					
	PURPOSE	(a)	Category (See Categorie	s listed at the top of this sche	edule)	b) Description			
	OF EXPENDITURE		Travel In District				n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense NGS	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder	name O)ffice soug	ht		Office held	

		EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fe Fo Gi nmittee Le	rent Expense bes iod/Beverage Expens ft/Awards/Memorials I gal Services he Instruction Gu	Expense	Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/Contract Labor		Travel in District Travel Out of Dist	quipment & Related Expense	
1	Total pages Schedule F1:	2			140 0			13	Filer ID	(Ethics Commission Filers)	\
-	Sch: 11/57 Rpt: 39/86			nald E. (The H	lonorable)				00062098		,
4	Date	5	Payee name								
	11/24/2023		Chevron								
6	Amount (\$) \$77.25	7	Payee address 503 Texas Pa Missouri City	Irkway	State;	Zip Cod	e				
8	PURPOSE	(a)	Category (See	Categories listed at th	e top of this sch	edube)	b) Description				
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense Travel for meetings											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Office	holder name	C	Office soug	ht		Office he	ld	
	Date		Payee name								
	12/12/2023		Chevron								
	Amount (\$)		Payee address	; City;	State;	Zip Cod	е				
	\$75.46		503 Texas Pa Missouri City	-							
	PURPOSE OF EXPENDITURE	(a)	Category _{(See} Travel In Dist	Categories listed at th riCt	e top of this sche	edule) (n, TX,	de of Texas. Comp , officeholder living NGS		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Office	holder name	C	Office soug	ht		Office he	ld	
	Date		Payee name								_
	11/01/2023		Chis Hollins (Campaign							
	Amount (\$) \$1,000.00		Payee address P.O. Box 563		State;	Zip Cod	e				
			Houston, TX	77256							
	PURPOSE OF EXPENDITURE	(a)	Contributions	Categories listed at th /Donations Ma ficeholder/Polit	de By	,		n, TX,	de of Texas. Comp officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Office	holder name	C	Office soug	ht		Office he	ld	

			EXPENDITURE CA	TEGORIE	S FOR B	OX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	F F G ommittee L	vent Expense ees ood/Beverage Expense iif/Awards/Memorials Exper egal Services The Instruction Guide e	Off Po Ise Pri Sa	lice Overhea lling Expens nting Expen laries/Wage	se s/Contract Labor	Ti Ti Ti	ransportation E ravel in District ravel Out of Dis	raising Expense quipment & Related Expe trict category not listed above	
1	Total pages Schedule F1:						ן א Fi	iler ID	(Ethics Commission	Filers)
-	Sch: 12/57 Rpt: 40/86		onald E. (The Hono	rable)				0062098		
4	Date 10/16/2023	Payee name Christian Mer	nefee Campaign							
				Ctata: 7	in Cada					
6	Amount (\$) \$500.00	Payee address Houston, TX	s; City;	State; Z	ip Coue					
8	DUDDOSE				(h)	Description				
δ	PURPOSE OF EXPENDITURE	of this schedule 3y Committe		Description Check if travel of Check if Austin, Contribution			plete Schedule T. expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Office	eholder name	Offic	e sought			Office he	eld	
	Date	Payee name								
	09/13/2023	Churrascos								
	Amount (\$)	Payee address	s; City;	State; Z	ip Code					
	\$64.04	1520 Lake Po Sugar Land,	ointe Pkwy #500 TX 77478							
	PURPOSE OF EXPENDITURE) Category _{(See} Food/Bevera	Categories listed at the top ge Expense	of this schedule	_{≥)} (b)	Description Check if travel of Check if Austin, Food for cam	, TX, off	ficeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Office	eholder name	Offic	e sought			Office he	eld	
	Date	Payee name								
	09/22/2023	Coach Trans	port							
	Amount (\$) \$9.10	Payee address	; City;	State; Z	ip Code					
		Washington ,	DC							
	PURPOSE OF EXPENDITURE) Category _{(See} Travel Out of	Categories listed at the top District	of this schedule	₂₎ (b)	Description Check if travel o Check if Austin, Travel out of	, TX, off	ficeholder living	plete Schedule T. expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Office	eholder name	Offic	e sought			Office he	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursemu Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 13/57 Rpt: 41/86	Reynolds, Ronald E. (The Honorable)	00062098							
4	Date 07/16/2023	Payee name Constant Contact								
6	Amount (\$) \$241.99	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Campaign email service										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	08/16/2023	Constant Contact								
	Amount (\$) \$241.99	Payee address; City; State; Zip Code 1601 Trapelo Road								
	PURPOSE	Waltham, MA 02451								
	OF EXPENDITURE		avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense n Email Services							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	09/16/2023	Constant Contact								
	Amount (\$) \$241.99	Payee address; City; State; Zip Code 1601 Trapelo Road								
		Waltham, MA 02451								
	PURPOSE OF EXPENDITURE		avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense D Email Services							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 14/57 Rpt: 42/86	Reynolds, Ronald E. (The Honorable)	00062098							
4	Date 10/16/2023	Payee name Constant Contact								
6	6 Amount (\$) \$241.99 Valtham, MA 02451									
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Image: Check if Austin, TX, officeholder living expense Image: Check if Austin, TX, officeholder living expense Campaign Email Services										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	11/16/2023	Constant Contact								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$241.99	1601 Trapelo Road Waltham, MA 02451								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense mail Services							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	12/16/2023	Constant Contact								
	Amount (\$) \$241.99	Payee address; City; State; Zip Code 1601 Trapelo Road								
		Waltham, MA 02451								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense nail services							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

			EXPENDITURE	CATEGOR	RIES FOR I	3OX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services		Office Overh Polling Exper Printing Expe Salaries/Wag	ense Jes/Contract Labor	Travel in District Travel Out of Dis	quipment & Related Expense
Ļ	This is a Catadula F1.	The Instruction Guide explains how to complete this f						(Titling On annianian Filoro)
1	Total pages Schedule F1: Sch: 15/57 Rpt: 43/86		ME s, Ronald E. (The Ho	norable)			3 Filer ID 00062098	(Ethics Commission Filers)
4	Date	5 Payee na	me				•	
	12/14/2023	Curb Tax						
6	Amount (\$) \$21.76	7 Payee ad	dress; City;	State;	Zip Code	2		
8	PURPOSE	(a) Category	(See Categories listed at the	top of this sche	edule) (k) Description		
	OF EXPENDITURE		ut of District				outside of Texas. Comp n, TX, officeholder living district	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Officeholder name	C	office sough	it	Office he	ld
	Date	Payee na	me					
	09/23/2023	Curb						
	Amount (\$) \$15.95	Payee ad	dress; City;	State;	Zip Code	3		
		Washing	ton, DC					
	PURPOSE OF EXPENDITURE		(See Categories listed at the ut of District	top of this sche	edule) (k		outside of Texas. Comp n, TX, officeholder living district	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Officeholder name	C	office sough	t	Office he	ld
	Date	Payee na	me					
	09/24/2023	Curb						
	Amount (\$) \$6.39	Payee ad	dress; City;	State;	Zip Code	2		
		Washing	ton, DC					
	PURPOSE OF EXPENDITURE		(See Categories listed at the ut of District	top of this sche	edule) (k		outside of Texas. Comp n, TX, officeholder living district	
	Complete ONLY if direct expenditure to benefit C/OF		Officeholder name	C)ffice sough	t	Office he	ld

			EXPEN	DITURE CATEGOR	RIES FOR E	3OX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee Legal Service	le Expense lemorials Expense s	Office Overh Polling Exper Printing Expe Salaries/Wag	ense jes/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related E Travel in District Travel Out of District OTHER (enter a category not listed ab	
				tion Guide explains h	how to com	plete this form.	_		
1	Total pages Schedule F1:	2					3	Filer ID (Ethics Commiss	ion Filers)
	Sch: 16/57 Rpt: 44/86		Reynolds, Ronald E.	(The Honorable)				00062098	
4	Date	5	Payee name						
	09/24/2023		Curb						
6	Amount (\$)	7	Payee address; City	/; State;	Zip Code	9			
	\$10.11				·				
			Washington, TX						
_			_						
8	PURPOSE OF	(a)	Category (See Categories	isted at the top of this sche	edule) (k	Description	outoi	ida af Taylaa, Camplata Cabadula T	
	EXPENDITURE		Travel Out of District					ide of Texas. Complete Schedule T. , officeholder living expense	
						Travel out of			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder n	ame O)ffice sough	nt		Office held	
	Date		Payee name						
	10/10/2023		Danielle Keys Bess C	ampaign					
			-		Zin Code				
	Amount (\$)			, State,	Zip Code	;			
	\$500.00		P.O. Box 8367						
			Houston, TX 77288						
	PURPOSE	(a)	Category (See Categories	isted at the top of this sche	edule) (k	Description			
	OF EXPENDITURE		Contributions/Donatio					ide of Texas. Complete Schedule T.	
			Candidate/Officehold	er/Political Comm	ittee		I, IX,	, officeholder living expense	
						Continuation			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder na	ame O	Office sough	IT		Office held	
	•	i –							
	Date		Payee name						
	11/08/2023		Dexter McCoy Camp	aign					
	Amount (\$)		Payee address; City	/; State;	Zip Code	9			
	\$1,000.00		P.O. Box 1398						
			Richmond, TX 77406						
	PURPOSE OF	(a)	Category (See Categories		edule) (k) Description			
	EXPENDITURE		Contributions/Donatio		ittee			ide of Texas. Complete Schedule T. , officeholder living expense	
			Candidate/Officehold	er/Political Comm	lillee	Contribution	I, IA,	, onicendider living expense	
						Contribution			
_		Ļ	andidata/Office balder)ffice occurs	^+		Office hold	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder n	ame O	office sough	IL		Office held	

			EXPENDITURE	CATEGOR	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Comm Credit Card Payment Total pages Schedule F1: 2 F		Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	e	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Fil	lers)
	Sch: 17/57 Rpt: 45/86		Reynolds, Ronald E. (The Ho	onorable)				00062098	,
4	Date 10/31/2023	5	Payee name DoorDash						
6		-		Stata	; Zip Coc				
0	Amount (\$) \$55.96	'	Payee address; City; 303 2nd Street San Francisco, TX 94107	State,	, zip cou	le			
_	BUBBAAE				<u> </u>				
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the Food/Beverage Expense	top of this sch	ledule)	Check if Austi	n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense ign volunteers	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Office soug	ht		Office held	
	Date		Payee name						
	10/19/2023		Eric Fagan Campaign						
	Amount (\$)		Payee address; City;	State;	; Zip Coc	le			
	\$500.00		P. O. Box 2204 Sugar Land, TX 77487						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the Contributions/Donations Mad Candidate/Officeholder/Politie	le By			n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder name	C	Office soug	ht		Office held	
	Date		Payee name						
	07/06/2023		ExxonMobil						
	Amount (\$)		Payee address; City;	State:	; Zip Coc	le			
	\$5.01		1810 Pearland Pkwy		•				
			Pearland, TX 77581						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the Travel In District	top of this sch	edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense NG	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	С	Office soug	ht		Office held	

			EXPENDITURE CATEGO	RIES FO	R BC	DX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mittee Legal Services The Instruction Guide explains	Office Ov Polling Ex Printing E Salaries/	verhead xpense Expense Wages	e /Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	· · ·				3	Filer ID (Ethics Commission Filers)
-	Sch: 18/57 Rpt: 46/86		Reynolds, Ronald E. (The Honorable)	1				00062098
4	Date	5	Payee name					
	07/13/2023		ExxonMobil					
6 Amount (\$) \$56.75 7 Payee address; City; State; Zip Code 1810 Pearland Pkwy Pearland, TX 77581								
8	PURPOSE		· · · · · · · · · · · · · · · · · · ·		(h)	Description		
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel for meetings							officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ught			Office held
	Date		Payee name					
	07/30/2023		ExxonMobil					
	Amount (\$)		Payee address; City; State	e; Zip Co	ode			
	\$84.00		1810 Pearland Pkwy Pearland, TX 77581					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so Travel In District	hedule)	(b)		, TX,	de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ught			Office held
	Date		Payee name					
	08/03/2023		ExxonMobil					
	Amount (\$) \$44.54		Payee address; City; State 1810 Pearland Pkwy	e; Zip Co	ode			
			Pearland, TX 77581					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so Travel In District	hedule)	(b)		, TX,	de of Texas. Complete Schedule T. officeholder living expense NGS
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ught			Office held

			EXPENDITURE CATEGO	RIES FO	R BC	DX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explain:	Office Ov Polling E Printing E Salaries/	verhead xpense Expense Wages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	· · ·				3	Filer ID (Ethics Commission Filers)
1	Sch: 19/57 Rpt: 47/86	2	Reynolds, Ronald E. (The Honorable))				00062098
4	Date	5	Payee name					
	08/18/2023		ExxonMobil					
6	Amount (\$)	7	Payee address; City; State	e; Zip C	ode			
	\$86.35		1810 Pearland Pkwy					
			Pearland, TX 77581					
8	PURPOSE	(a)	Category (See Categories listed at the top of this so	adula)	(b)	Description		
-	OF		Travel In District	chequie)	()		outsi	de of Texas. Complete Schedule T.
	EXPENDITURE					Check if Austin	ı, ТХ,	officeholder living expense
						Travel for me	etii	ngs
9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH							Office held	
	Date		Payee name					
	09/08/2023		ExxonMobil					
	Amount (\$)		Payee address; City; State	e; Zip C	ode			
	\$95.73		1810 Pearland Pkwy					
			Pearland, TX 77581					
	PURPOSE OF EXPENDITURE	(a)	 Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedu Check if Austin, TX, officeholder living expense Travel for meetings 					officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	Office so	ught			Office held
	Date		Payee name					
	10/08/2023		ExxonMobil					
	Amount (\$)		Payee address; City; State	e; Zip C	ode			
	\$50.00		1810 Pearland Pkwy	o,p o	ouo			
	400.00							
			Pearland, TX 77581					
	PURPOSE	(a)	Category (See Categories listed at the top of this so	chedule)	(b)	Description		
	OF EXPENDITURE		Travel In District					de of Texas. Complete Schedule T.
						Travel for me		officeholder living expense
							cul	iyə
		Ļ	Condidate/Officebolder rearra	Office				Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ugnt			Office held

			EXPENDITURE CATEGORIE	ES FOR	BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees O Food/Beverage Expense Pe Gift/Awards/Memorials Expense Pr	Office Overl Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	•		.	3	Filer ID (Ethics Commission Filers)		
-	Sch: 20/57 Rpt: 48/86		Reynolds, Ronald E. (The Honorable)				00062098		
4	Date	5	Payee name						
	10/09/2023		ExxonMobil						
6	Amount (\$) \$40.99	7	Payee address; City; State; Z 1810 Pearland Pkwy	Zip Cod	e				
			Pearland, TX 77581						
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedul	ule) (b) Description				
	OF EXPENDITURE		Travel In District				ide of Texas. Complete Schedule T.		
							, officeholder living expense		
					Travel for me	etii	ngs		
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held							Office held		
	Date		Payee name						
	10/27/2023		ExxonMobil						
_				7in Cod					
	Amount (\$)		Payee address; City; State; Z	zip Cou	е				
	\$80.51 1810 Pearland Pkwy								
			Pearland, TX 77581						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedul Travel In District	ule) (n, TX	ide of Texas. Complete Schedule T. , officeholder living expense ngS		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Officeholder	ice soug	ht		Office held		
	Date		Payee name						
	11/19/2023		ExxonMobil						
	Amount (\$)		Payee address; City; State; Z	Zip Cod	е				
	\$65.97		1810 Pearland Pkwy	·					
			Pearland, TX 77581						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedul Travel In District	ule) (ide of Texas. Complete Schedule T.		
					Travel for me		, officeholder living expense NGS		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Offic	ice soug	ht		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2			•	3	Filer ID (Ethics Commission Filers)
	Sch: 21/57 Rpt: 49/86		Reynolds, Ronald E. (The Honorable)				00062098
4	Date	5	Payee name				
	12/18/2023		Fort Bend County Democratic Party				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de		
	\$1,000.00		13515 Southwest Fwy #204				
			Sugar Land, TX 77478				
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Contributions/Donations Made By				de of Texas. Complete Schedule T.
			Candidate/Officeholder/Political Commi	ittee		ι, TX,	officeholder living expense
					Contribution		
9	Complete ONLY if direct		Candidate/Officeholder name O	Office sou	aht		Office held
-	expenditure to benefit C/OI						
⊨	Date		Payee name				
	12/26/2023		Fort Bend Democratic Women				
⊢	Amount (\$) Payee address; City; State; Zip Code						
	\$50.00						
			тх				
_	PURPOSE	(a)	Category (See Categories listed at the top of this sche	(aluba	(b) Description		
	OF		Contributions/Donations Made By	cuule)		outsi	de of Texas. Complete Schedule T.
	EXPENDITURE		Candidate/Officeholder/Political Commi	ittee		, TX,	officeholder living expense
					Donation		
┝	Complete ONLY if direct		Condidate/Officeholder name)ffico cou	n.h.t		Office held
	expenditure to benefit C/OI		Candidate/Officeholder name O	Office sou	gni		Onice field
╞	Data	<u> </u>	D				
	Date 09/06/2023		Payee name Forward Times				
_				Zip Co	do		
	Amount (\$) \$500.00		Payee address; City; State; 4411 Almeda Rd	Zip Co	ue		
	\$500.00						
			Houston, TX 77004				
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Advertising Expense	cualcy		outsi	de of Texas. Complete Schedule T.
	EXPENDITORE						officeholder living expense
					Campaign er	nall	auvenusing
_	Complete ONLY if direct	Ļ	Candidate/Officeholder name O	Office sou	nht		Office held
	expenditure to benefit C/OI			1110E 30U			
-							

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	Fees Offi Food/Beverage Expense Poll Gift/Awards/Memorials Expense Prir	fice Overhe Iling Expen nting Expe Iaries/Wag	nse es/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 22/57 Rpt: 50/86		Reynolds, Ronald E. (The Honorable)				00062098
4	Date 07/27/2023	5	Payee name Gallego for Arizona				
6	Amount (\$) \$500.00	7	Payee address; City; State; Zij P.O. Box 1710 Phoenix, TX 85001	ip Code			
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee				de of Texas. Complete Schedule T. officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office	e sough	t		Office held
	Date		Payee name				
	10/04/2023		Google				
	Amount (\$) \$123.33		Payee address; City; State; Zij 1600 Amphitheatre Parkway	ip Code			
			Mountain View, CA 94043		-		
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Advertising Expense	_{≥)} (b		, тх,	de of Texas. Complete Schedule T. officeholder living expense tising
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name Office	e sough	t		Office held
	Date		Payee name				
	12/01/2023		Google				
	Amount (\$) \$75.06		Payee address; City; State; Zij 1600 Amphitheatre Parkway	ip Code			
			Mountain View, CA 94043	i			
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Advertising Expense	_{≥)} (b		, тх,	de of Texas. Complete Schedule T. officeholder living expense tising
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office	e sough	t		Office held

				EXPENDITU	RE CATEGO	RIES FOF	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage Expe Gift/Awards/Memorial Legal Services	s Expense	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Travel in District Travel Out of Dist	uipment & Related Expense
	-			The Instruction G	uide explains	how to co	nplete this form.	-		
1	Total pages Schedule F1:	2	FILER NAME	Ξ				3	Filer ID	(Ethics Commission Filers)
	Sch: 23/57 Rpt: 51/86		Reynolds, F	Ronald E. (The	Honorable)				00062098	
4	Date	5	Payee name							
	12/20/2023		Google							
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	de			
	\$21.44		1600 Amph	itheatre Parkwa	ay					
			Mountain V	iew, CA 94043						
8	PURPOSE	(a)					(b) Description			
0	OF	(a)	Advertising	ee Categories listed at	the top of this sch	iedule)	(b) Description Check if travel	outsi	de of Texas. Comp	lete Schedule T.
	EXPENDITURE		Auventising	Lypense					officeholder living	
							Campaign ad	dve	rtising	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	C	Office sou	ght		Office he	ld
	Date		Payee name							
	12/31/2023		Google							
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de			
	\$75.06			itheatre Parkwa		,				
	\$10.00		2000 / 11101		~9					
			Mountain V	iew, CA 94043						
	PURPOSE OF	(a)	Category (S	ee Categories listed at	the top of this sch	edule)	(b) Description			
	EXPENDITURE		Advertising	Expense					de of Texas. Comp officeholder living	
							Campaign ac			expense
							eampaign at		lionig	
	Complete ONLY if direct		andidate/Off	iceholder name	(Office sou	tht		Office he	ld
	expenditure to benefit C/Oł			icentification nume	· · · ·		jit		Onice he	
	Data	1								
	Date 11/24/2023		Payee name	tage Campaigr						
							-			
	Amount (\$)		Payee addre		State	; Zip Co	de			
	\$1,000.00		Po Box 835	•						
			Missouri Ci	ty, TX 77459						
	PURPOSE	(a)	Category (S	ee Categories listed at	the top of this sch	edule)	(b) Description			
	OF EXPENDITURE			ns/Donations M					de of Texas. Comp	
			Candidate/	Officeholder/Po	litical Comm	nittee		ι, TX,	officeholder living	expense
							Contribution			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	C	Office sou	ght		Office he	ld
		•								

		EXPENDITURE CATEGORIES FOR BOX 8(a)
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
-	Sch: 24/57 Rpt: 52/86	Reynolds, Ronald E. (The Honorable) 00062098
4	Date	5 Payee name
	09/22/2023	Grand Cab
6	Amount (\$) \$11.17	 7 Payee address; City; State; Zip Code Washington, DC
8	PURPOSE	-
0	OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel out of district
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/24/2023	Grand Cab
	Amount (\$) \$12.02	Payee address; City; State; Zip Code
		Washington, DC
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel out of district
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/01/2023	Grand Hyatt
	Amount (\$) \$870.22	Payee address; City; State; Zip Code
		TX
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel out of district
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

			EXPENDITURE CATEGORIE	ES FOR	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees C Food/Beverage Expense F Gift/Awards/Memorials Expense F	Office Overh Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2				3	Filer ID (Ethics Commission Filers)
-	Sch: 25/57 Rpt: 53/86		Reynolds, Ronald E. (The Honorable)				00062098
4	Date	5	Payee name				
	07/15/2023		HEB Gas				
6	Amount (\$) \$70.18		Payee address; City; State; 2 4724 Hwy 6 Missouri City, TX 77459	Zip Cod	9		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedu	ule) (b) Description		
	OF EXPENDITURE		Travel In District	uic)	Check if travel	, TX,	de of Texas. Complete Schedule T. officeholder living expense NGS
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Offi	ice sougl	nt		Office held
	Date		Payee name				
	10/14/2023		HEB Gas				
	Amount (\$)		Payee address; City; State;	Zip Cod	9		
	\$34.00		4724 Hwy 6 Missouri City, TX 77459				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedu Travel In District	ule) (, TX,	de of Texas. Complete Schedule T. , officeholder living expense NGS
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Offi	ice sougl	nt		Office held
	Date		Payee name				
	09/20/2023		Harland Clarke				
	Amount (\$) \$34.40		Payee address; City; State; 2 15955 La Cantera Pkwy	Zip Cod	9		
			San Antonio, TX 78256				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedu Fees	ule) (, TX,	de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Offi	ice soug	nt		Office held

			EXPENDITURE CATEGOR	RIES FOR	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Over Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	· · · ·			3	Filer ID (Ethics Commission Filers)
-	Sch: 26/57 Rpt: 54/86		Reynolds, Ronald E. (The Honorable)				00062098
4	Date 10/02/2023		Payee name Hotel ZaZa				
6	Amount (\$) \$68.46		Payee address; City; State; 5701 Main Street Houston, TX 77002	; Zip Coo	le		
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)		, тх,	ide of Texas. Complete Schedule T. , officeholder living expense g
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	Iht		Office held
	Date	Γ	Payee name				
	07/28/2023		Houston Chronicle				
	Amount (\$) \$27.72		4747 Southwest Fwy	; Zip Coo	le		
			Houston, TX 77027				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Fees	edule)		, тх,	ide of Texas. Complete Schedule T. , officeholder living expense ES
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	Jht		Office held
	Date	Γ	Payee name				
	08/25/2023		Houston Chronicle				
	Amount (\$) \$27.72		Payee address;City;State;4747 Southwest Fwy	; Zip Coo	le		
			Houston, TX 77027				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Fees	edule)		, тх,	ide of Texas. Complete Schedule T. , officeholder living expense ES
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	Jht		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME		·	3	Filer ID (Ethics Commission Filers)
-	Sch: 27/57 Rpt: 55/86		Reynolds, Ronald E. (The Honorable)				00062098
4	Date 09/27/2023		Payee name Houston Chronicle				
6	6 Amount (\$) \$27.72 7 Payee address; City; State; Zip Code 4747 Southwest Fwy Houston, TX 77027						
8	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Image: Check if Austin, TX, officeholder living expense Subscription fees					officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght		Office held
	Date		Payee name				
	10/20/2023		Houston Chronicle				
	Amount (\$) \$27.72		Payee address; City; State 4747 Southwest Fwy Houston, TX 77027	e; Zip Co	de		
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Fees	hedule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense S
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght		Office held
	Date		Payee name				
	11/17/2023		Houston Chronicle				
	Amount (\$) \$27.72		Payee address; City; State 4747 Southwest Fwy	e; Zip Co	de		
			Houston, TX 77027				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Fees	hedule)		, тх,	de of Texas. Complete Schedule T. officeholder living expense S
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name	Office sou	ght		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 28/57 Rpt: 56/86	Reynolds, Ronald E. (The Honorable)	00062098			
4	Date 12/15/2023	Payee name Houston Chronicle				
6	Amount (\$) \$27.72	Payee address; City; State; Zip Code 4747 Southwest Fwy Houston, TX 77027				
8	PURPOSE OF EXPENDITURE	F Check if travel outside of Texas. Complete Schedule T.				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	10/08/2023	Houston Defender				
	Amount (\$) \$750.00	Payee address; City; State; Zip Code 12401 South Post Oak Houston, TX 77045				
	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense nail advertising			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	09/25/2023	Houston Parking Garage				
	Amount (\$) \$96.00	Payee address; City; State; Zip Code				
		Houston, TX				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAME 3	Filer ID (Ethics Commission Filers)			
	Sch: 29/57 Rpt: 57/86	Reynolds, Ronald E. (The Honorable)	00062098			
4	Date	5 Payee name				
	10/26/2023	Houston Parking Garage				
6	Amount (\$) \$106.00	 Payee address; City; State; Zip Code Houston, TX 				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Travel In District	tside of Texas. Complete Schedule T. X, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	12/21/2023	Houston Random Acts of Kindness				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$1,000.00	11152 Westheimer Rd. #115 Houston , TX 77042				
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	12/13/2023	Hyatt Regency				
	Amount (\$) \$64.70	Payee address; City; State; Zip Code				
		Austin, TX				
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule Τ. Χ, officeholder living expense istrict			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2 FILER NAME	Filer ID (Ethics Commission Filers)		
-	Sch: 30/57 Rpt: 58/86	Reynolds, Ronald E. (The Honorable)	00062098		
4	Date 09/09/2023	5 Payee name Isaiah Martin Campaign			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
0	\$100.00	PO Box 53843,			
		Houston, TX 77002			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE		tside of Texas. Complete Schedule T. 'X, officeholder living expense		
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	08/24/2023	J & K Korner Store			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$40.00	1601 E Main St			
		Eagle Lake, TX 77434			
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. 'X, officeholder living expense ting		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
-	Date	Payee name			
	11/03/2023	JaPaula Kemp Campaign			
-	Amount (\$)	Payee address; City; State; Zip Code			
	\$250.00				
		ТХ			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	tside of Texas. Complete Schedule T.		
	EXPENDITURE		X, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 31/57 Rpt: 59/86	Reynolds, Ronald E. (The Honorable)	00062098			
4	Date 12/11/2023	5 Payee name JaPaula Kemp Campaign				
6	Amount (\$) \$100.00	7 Payee address; City; State; Zip Code				
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	09/15/2023	Jamie Jordan Campaign				
	Amount (\$) Payee address; City; State; Zip Code \$500.00					
		Missouri City , TX				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	12/02/2023	Jamie Jordan Campaign				
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code				
		Missouri City, TX				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
1	Sch: 32/57 Rpt: 60/86	Reynolds, Ronald E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062098 00062098
4	Date 12/15/2023	Payee name Jets and Jackets Blue Carpet Christmas Fundraiser	·
6	Amount (\$)	Payee address; City; State; Zip Code	
Ŭ	\$150.00	11551 Aerospace Avenue Houston, TX 77034	
8	PURPOSE		
0	OF		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	10/30/2023	Johnson, Antron	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	Houston, TX	
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense VORK
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
⊨	Date	Payee name	
	11/18/2023	Julie Johnson for Congress	
	Amount (\$) \$1,000.00	Payee address;City;State; Zip CodePo Box 802765	
		Dallas, TX 75380	
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense 1
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

		EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:		Filer ID (Ethics Commission Filers)					
	Sch: 33/57 Rpt: 61/86	Reynolds, Ronald E. (The Honorable)	00062098					
4	Date 09/10/2023	5 Payee name Leaders Esteem University						
6	Amount (\$) \$150.00	7 Payee address; City; State; Zip Code 2001 Timberloch Pl The Woodlands, TX 77380						
8	PURPOSE OF EXPENDITURE	Contributions/Donations Made By						
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held								
	Date	Payee name						
	09/10/2023	Leaders Esteem University						
	Amount (\$) \$750.00	Payee address; City; State; Zip Code 2001 Timberloch Pl						
		The Woodlands, TX 77380						
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	10/03/2023	Levine, Burt						
	Amount (\$) \$400.00	Payee address; City; State; Zip Code 9600 Glenfield Court						
		Houston, TX 77096						
	PURPOSE OF EXPENDITURE	OF Salaries/Wages/Contract Labor						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

		EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Git/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	· ·	3 Filer ID (Ethics Commission Filers)						
-	Sch: 34/57 Rpt: 62/86	Reynolds, Ronald E. (The Honorable)	00062098						
4	Date 11/13/2023	Payee name Lifting Families Together							
6	Amount (\$) \$500.00	Payee address; City; State; Zip Code P.O. Box 1014 Missouri City, TX 77459							
8	PURPOSE OF EXPENDITURE	OF Contributions/Donations Made By							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/22/2023	Marriott Marquis							
	Amount (\$) \$18.48	Payee address; City; State; Zip Code 901 Massachusetts Ave NW							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense district						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/23/2023	Marriott Marquis							
	Amount (\$) \$32.07	Payee address; City; State; Zip Code 901 Massachusetts Ave NW							
		Washington , DC 20001							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense district						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

				EXPENDITURI	E CATEGOF	RIES FOR	BO	K 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor						Solicitation/Fund Transportation E Travel in District Travel Out of Dis OTHER (enter a	quipment & I trict	Related Expense
1	Total pages Schedule F1:	2 F					-		3	Filer ID	(Ethics C	ommission Filers)
-	Sch: 35/57 Rpt: 63/86			ynolds, Ronald E. (The Honorable) 00062098								
4	Date 09/24/2023	1	Payee name Marriott Marq									
6	Amount (\$) \$297.99	9	Payee address 101 Massach Vashington ,	usetts Ave NW		; Zip Coo	de					
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel out of district								ile T.				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Indidate/Office	holder name	C	Office sou	ght			Office he	eld	
	Date	P	ayee name									
	09/24/2023	N	Arriott Marq	luis								
	Amount (\$) \$6.00		ayee address 01 Massach	; City; iusetts Ave NW		; Zip Coo	de					
			Vashington ,				<u> </u>					
	PURPOSE OF EXPENDITURE	1	Category _{(See} Travel Out of	Categories listed at th District	e top of this sch	nedule)			, TX,	le of Texas. Com officeholder living riCt		ile T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Indidate/Office	holder name	C	Office sou	ght			Office he	eld	
	Date	Р	ayee name									
	09/26/2023	N	Arriott Marq	luis								
	Amount (\$) \$595.98	1	Payee address	s; City; nusetts Ave NW		; Zip Coo	de					
			Vashington ,									
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel out of district								ile T.				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Indidate/Office	holder name	C	Office sou	ght			Office he	eld	

			EXPENDITURE CATEGO	RIES FO	R BC	DX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing E Salaries/V	erhea kpense xpens Wages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	· · ·		•		3	Filer ID (Ethics Commission Filers)			
-	Sch: 36/57 Rpt: 64/86		Reynolds, Ronald E. (The Honorable)	1			5	00062098			
4	Date	5	Payee name								
	08/24/2023		Matt's El Rancho								
6	Amount (\$) \$87.29		Payee address; City; State 2613 S Lamar Blvd Austin, TX 78704	e; Zip Co	ode						
8	PURPOSE	(a)	Category (See Categories listed at the top of this so	hedule)	(b)	Description					
	OF EXPENDITURE	OF Ecod/Beverage Expense									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office sou	ught			Office held			
	Date		Payee name								
	09/08/2023		Minority Print								
	Amount (\$)		Payee address; City; State	e; Zip Co	ode						
	\$300.00		2646 S Loop W Houston, TX 77054								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so Printing Expense	hedule)	(b)			de of Texas. Complete Schedule T. officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office sou	ight			Office held			
	Date		Payee name								
	08/20/2023		Miracle Christian Fellowship Church								
	Amount (\$) \$250.00		Payee address; City; State	e; Zip Co	ode						
			Houston, TX		-						
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation											
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office sou	ight			Office held			

		EXPENDITURE CATEGORIES FOR BOX 8(a	a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reim Fees Office Overhead/Renta Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contra The Instruction Guide explains how to complete this	al Expense Transportation Equipment & Related Expense Travel in District Travel Out of District act Labor OTHER (enter a category not listed above)						
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)						
	Sch: 37/57 Rpt: 65/86	Reynolds, Ronald E. (The Honorable)	00062098						
4	Date 08/20/2023	Payee name Miracle Christian Fellowship Church							
6	Amount (\$) \$250.00	Payee address; City; State; Zip Code Houston, TX							
8	PURPOSE OF EXPENDITURE	OF Contributions/Donations Made By							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/30/2023	National Black Caucus of State Legislators Conference							
	Amount (\$) \$575.00	Payee address; City; State; Zip Code 444 North Capitol Street, NW, Suite 622							
		Washington, DC 20001							
	PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	cription heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense ation						
	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	07/06/2023	National Black Caucus of State Legislators Conference							
	Amount (\$) \$410.00	Payee address; City; State; Zip Code 444 North Capitol Street, NW, Suite 622							
		Washington, DC 20001							
	PURPOSE OF EXPENDITURE		cription heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense nbership dues						
	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held						

		EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Rein Fees Office Overhead/Rent Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contr The Instruction Guide explains how to complete thi	al Expense Transportation Equipment & Related Expense Travel in District Travel Out of District act Labor OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	· · ·	3 Filer ID (Ethics Commission Filers)					
1	Sch: 38/57 Rpt: 66/86	Reynolds, Ronald E. (The Honorable)	00062098					
4	Date 10/18/2023	Payee name National Black United Front						
6	Amount (\$) \$250.00	Payee address; City; State; Zip Code 2428 Southmore Blvd Houston, TX 77004						
8	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 Check if Austin, TX, officeholder living expense Donation							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	07/05/2023	New St. Phillips MBC						
	Amount (\$) Payee address; City; State; Zip Code \$250.00 6135 Highway 521							
		Arcola, TX 77583						
	PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Nation					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	08/28/2023	Next Wave Strategies						
	Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 2339 Commerce St suite 213						
		Houston, TX 77002						
	PURPOSE OF EXPENDITURE		cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense npaign consulting					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officeholder name Office sought	Office held					

				EXPENDITU	JRE CATEGOR	RIES FOR	ES 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 Exp Bift/Awards/Memori Legal Services The Instruction		Office Ove Polling Exp Printing Ex Salaries/W	head/Re ense pense ages/Co	Reimbursement ental Expense ontract Labor this form.		Solicitation/Fund Transportation E Travel in District Travel Out of Dis OTHER (enter a	quipment & R trict	elated Expense
1	Total pages Schedule F1:	2			•		•		3	Filer ID	(Ethics Co	ommission Filers)
_	Sch: 39/57 Rpt: 67/86	_	Reynolds, R	onald E. (The	e Honorable)					00062098	(
4	Date	5	Payee name									
	11/04/2023		Popeyes									
6	Amount (\$) \$36.33	7	Payee addres 4850 Highwa	ау б	State;	; Zip Co	le					
			Missouri City									
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Image: Check if Austin, TX, officeholder living expense Image: Check if Austin, TX, officeholder living expense Food for campaign volunteers							е Т.					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	C	Office sou	Iht			Office he	eld	
	Date		Payee name									
	09/01/2023		Post Net									
	Amount (\$)		Payee addres	s; City;	State;	; Zip Co	le					
	\$169.22		6140 Highwa Missouri City	-								
	PURPOSE OF EXPENDITURE	(a)	Category _{(See} Office Overh		at the top of this sch Expense	iedule)		4	TX,	le of Texas. Com officeholder living GE		e T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	C	Office sou	Iht			Office he	eld	
	Date		Payee name									
	11/28/2023		Residence Ir	าท								
	Amount (\$) \$210.00		Payee addres	s; City;	State;	; Zip Co	le					
			ТХ									
	PURPOSE OF EXPENDITURE	(a)	Category _{(See} Travel Out o		at the top of this sch	nedule)	E	_	TX,	le of Texas. Com officeholder living riCt		e T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	C	Office sou	iht			Office he	eld	

			EXPENDITURE CATEGOR	RIES FOR	BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 40/57 Rpt: 68/86		Reynolds, Ronald E. (The Honorable)				00062098			
4	Date	5	Payee name							
	10/15/2023		Rhetta Bowers for Congress							
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le					
	\$1,000.00		3526 Lakeview Parkway Ste. B #211							
			Rowlett, TX 75088							
_										
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	b) Description					
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Commi				ide of Texas. Complete Schedule T. , officeholder living expense			
			Candidate/Onicenoide//Political Commi	lilee	Contribution	, 17	, oncertoider invitig expense			
					Contribution					
9	Complete ONLY if direct		Candidate/Officeholder name O	office souc	ht		Office held			
9	expenditure to benefit C/OI			nice sou	iit.		Onice held			
	Date		Payee name							
	08/11/2023		Ruben Gallego for Senate							
-	Amount (\$)	-	_	Zip Co						
	\$500.00		P.O. Box 1710	210 000						
	\$500.00		P.O. B0x 1710							
			Phoenix, AZ 85001							
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	b) Description					
	OF EXPENDITURE		Contributions/Donations Made By			eck if travel outside of Texas. Complete Schedule T.				
			Candidate/Officeholder/Political Commi	ittee		ı, TX	, officeholder living expense			
					Contribution					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office soug	ht		Office held			
	experialitate to benefit C/OI									
	Date		Payee name							
	12/12/2023		Run Sister Run Pac							
	Amount (\$)		Payee address; City; State;	Zip Co	le					
	\$500.00		P.O. Box 66470							
			Houston, TX 77266							
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	b) Description					
	OF EXPENDITURE		Contributions/Donations Made By				ide of Texas. Complete Schedule T.			
			Candidate/Officeholder/Political Commi	ittee		n, TX	, officeholder living expense			
					Contribution					
	Complete ONLY if direct		Candidate/Officeholder name O	office soug	ht		Office held			
	expenditure to benefit C/OI	Η								

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex Imittee Legal Services The Instruction Guid		Office Over Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2					3	Filer ID (Ethics Commission Filers)			
1	Sch: 41/57 Rpt: 69/86	2	Reynolds, Ronald E. (The Ho					00062098			
4	Date	5	Payee name								
	07/07/2023		Shell Oil								
6	Amount (\$) \$97.92	7	Payee address; City; 13747 Southwest Fwy	State;	; Zip Coo	de					
	\$97.92		13747 Southwest Fwy								
			Sugar Land, TX 77478								
8	PURPOSE	(a)	Category (See Categories listed at the	top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Travel In District					ide of Texas. Complete Schedule T.			
								, officeholder living expense			
						Travel for me	etii	ngs			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Dffice sou	ght		Office held			
	Date		Payee name								
	08/06/2023		Shell Oil								
	Amount (\$)		Payee address; City;	State [.]	Zip Co	de					
	\$82.98		13747 Southwest Fwy	State,	, zip co	de					
	402.90		13747 Southwest Fwy								
			Sugar Land, TX 77478								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the Travel In District	top of this scho	edule)		, TX	ide of Texas. Complete Schedule T. , officeholder living expense NGS			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name	C	Dffice sou	ght		Office held			
_	Date		Payee name								
	08/12/2023		Shell Oil								
	Amount (\$)		Payee address; City;	State;	; Zip Co	de					
	\$25.00		13747 Southwest Fwy								
			Sugar Land, TX 77478								
	PURPOSE	(a)	Category (See Categories listed at the	top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Travel In District					ide of Texas. Complete Schedule T.			
								, officeholder living expense			
						Travel for me	etii	ngs			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder name	С	Office sou	ght		Office held			
\vdash											

		EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide		Office Over Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2		CAPIGINE			3	Filer ID (Ethics Commission Filers)			
1	Sch: 42/57 Rpt: 70/86	2	Reynolds, Ronald E. (The Hone	orable)				00062098			
4	Date	5	Payee name								
	08/24/2023		Shell Oil								
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	de					
	\$86.24		13747 Southwest Fwy								
			Sugar Land, TX 77478								
8	PURPOSE	(a)	Category (See Categories listed at the top	of this sch	uodulo)	(b) Description					
-	OF	,	Travel In District		ieuuie)		outs	ide of Texas. Complete Schedule T.			
	EXPENDITURE					Check if Austin	I, TX	, officeholder living expense			
						Travel for me	eti	ngs			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	ght		Office held			
	Date		Payee name								
	09/01/2023		Shell Oil								
	Amount (\$)		Payee address; City;	State;	; Zip Coo	de					
	\$79.10		13747 Southwest Fwy		•						
			,								
			Sugar Land, TX 77478								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top Travel In District	o of this sch	edule)		I, TX	ide of Texas. Complete Schedule T. , officeholder living expense NGS			
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Dffice soug	ght		Office held			
	Date		Payee name								
	09/13/2023		Shell Oil								
	Amount (\$)		Payee address; City;	State	; Zip Coo	le					
	\$83.00		13747 Southwest Fwy	Oluto,	, <u>Lip</u> 000						
	400.00		10141 ObditiveSt1 Wy								
			Sugar Land, TX 77478								
	PURPOSE	(a)	Category (See Categories listed at the top	o of this sch	edule)	(b) Description					
	OF EXPENDITURE		Travel In District					ide of Texas. Complete Schedule T.			
	-							, officeholder living expense			
						Travel for me	eu	nyə			
					2.00	1.					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	jnt		Office held			

		EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitl/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	FII FR NAME	3 Filer ID (Ethics Commission Filers)			
_	Sch: 43/57 Rpt: 71/86	Reynolds, Ronald E. (The Honorable)	00062098			
4	Date 09/18/2023	Payee name Shell Oil				
6	Amount (\$) \$86.68	Payee address; City; State; Zip Code 13747 Southwest Fwy Sugar Land, TX 77478				
8	PURPOSE OF EXPENDITURE		l outside of Texas. Complete Schedule T. in, TX, officeholder living expense eetings			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	09/25/2023	Shell Oil				
Amount (\$)Payee address;City;State;Zip Code\$82.1513747 Southwest Fwy						
		Sugar Land, TX 77478				
	PURPOSE OF EXPENDITURE		l outside of Texas. Complete Schedule T. in, TX, officeholder living expense eetings			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	10/02/2023	Shell Oil				
	Amount (\$) \$80.96	Payee address;City;State;Zip Code13747 Southwest Fwy				
		Sugar Land, TX 77478				
	PURPOSE OF EXPENDITURE		l outside of Texas. Complete Schedule T. in, TX, officeholder living expense eetings			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

			EXPENDITURE CATEGO	RIES FOF	вох	(8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Com Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense hmittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	rhead/F bense pense 'ages/C	Reimbursement Rental Expense ontract Labor		Travel in District Travel Out of District	pment & Related Expense
1	Total pages Schedule F1:	5	•		Ilbict		2	Filer ID (E	Ethics Commission Filers)
T	Sch: 44/57 Rpt: 72/86		Reynolds, Ronald E. (The Honorable)					00062098	
4	Date 10/14/2023	5	Payee name Shell Oil						
6	Amount (\$) \$78.91	7	Payee address; City; State 13747 Southwest Fwy Sugar Land, TX 77478	e; Zip Co	de				
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Image: Check if Austin, TX, officeholder living expense Travel for meetings									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ght			Office held	
	Date		Payee name						
	10/19/2023		Shell Oil						
	Amount (\$) \$82.98		Payee address; City; State 13747 Southwest Fwy	e; Zip Co	de				
			Sugar Land, TX 77478						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this so Travel In District	hedule)			ΤX,	le of Texas. Complete officeholder living exp I GS	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght			Office held	
	Date		Payee name						
	10/28/2023		Shell Oil						
	Amount (\$) \$40.00		Payee address; City; State 13747 Southwest Fwy	e; Zip Co	de				
			Sugar Land, TX 77478						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sc Travel In District	hedule)			тx,	le of Texas. Complete officeholder living exp I GS	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ght			Office held	

			EXPENDITUR	E CATEGOR	RIES FOR	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expens Gitt/Awards/Memorials mittee Legal Services The Instruction Gu	Expense	Office Over Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2		•		r.	3	Filer ID (Ethics Commission Filers)
_	Sch: 45/57 Rpt: 73/86		Reynolds, Ronald E. (The F	Honorable)				00062098
4	Date 10/29/2023		Payee name Shell Oil					
6	Amount (\$) \$64.00		Payee address; City; 13747 Southwest Fwy Sugar Land, TX 77478	State;	; Zip Coo	le		
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at t Travel In District	he top of this sch	nedule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense NGS
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	C	Office sou	Jht		Office held
	Date		Payee name					
	12/02/2023		Shell Oil					
	Amount (\$)		Payee address; City;	State;	; Zip Co	le		
	\$76.80		13747 Southwest Fwy Sugar Land, TX 77478					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at t Travel In District	he top of this sch	nedule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense NGS
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Office sou	Jht		Office held
	Date		Payee name					
	12/09/2023		Shell Oil					
	Amount (\$) \$70.00		Payee address; City; 13747 Southwest Fwy	State;	; Zip Coo	le		
			Sugar Land, TX 77478		i			
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the Travel In District	he top of this sch	iedule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense NGS
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Office sou	Jht		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	Fees Office C Food/Beverage Expense Polling Gift/Awards/Memorials Expense Printing	Overhead Expense Expense Wages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 46/57 Rpt: 74/86		Reynolds, Ronald E. (The Honorable)				00062098			
4	Date 12/08/2023	5	Payee name Solel International							
6	Amount (\$) \$100.00	7	Payee address; City; State; Zip C 2339 Commerce St, Houston, TX 77002	Code						
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b)			de of Texas. Complete Schedule T. officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office so	ought			Office held			
	Date		Payee name							
	08/14/2023		South Post Oak Church							
	Amount (\$) \$250.00		Payee address; City; State; Zip C Houston, TX	Code						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b)			de of Texas. Complete Schedule T. officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office so	ought			Office held			
	Date		Payee name							
	07/01/2023		Southwest Airlines							
	Amount (\$) \$425.96		Payee address; City; State; Zip C 2702 Love Field Dr Dallas	Code						
			Dallas, TX 75235							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Travel Out of District	(b)		, TX,	de of Texas. Complete Schedule T. officeholder living expense trict			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name Office so	ought			Office held			

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME 3	Filer ID (Ethics Commission Filers)
	Sch: 47/57 Rpt: 75/86	Reynolds, Ronald E. (The Honorable)	00062098
4	Date 08/21/2023	Payee name Southwest Airlines	
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 2702 Love Field Dr Dallas Dallas, TX 75235	
8	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense StriCt
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/07/2023	Stafford Municipal School District Foundation	
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 1633 Staffordshire Road	
		Stafford, TX 77477	
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/01/2023	Star Stop	
	Amount (\$) \$7.51	Payee address; City; State; Zip Code	
		Sugar Land, TX	
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X. officeholder living expense tings
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

				EXPENDITUR	E CATEGOR	RIES FOR	BO	X 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fi Fi G nmittee Le	vent Expense ees bod/Beverage Expens ift/Awards/Memorials egal Services	Expense	Office Ove Polling Exp Printing Ex Salaries/W	rhead pense pense ages/	Contract Labor		Travel in District Travel Out of Dis	quipment & Relat	
_		1		he Instruction Gu	lide explains	now to col	npiei		_		(=1)	· ·
1	Total pages Schedule F1: Sch: 48/57 Rpt: 76/86	I		nald E. (The H	Honorable)					Filer ID 00062098	(Ethics Comr	nission Filers)
4	Date	5	Payee name									
-	08/21/2023			n Cuisine & Ba	ar							
6	Amount (\$)	7	Payee address	; City;	State;	; Zip Co	de					
	\$1,745.40		3424 FM 109	2 Road #290								
			Missouri City	TX 77459								
8	PURPOSE OF			Categories listed at t	he top of this sch	edule)	(b)	Description				
	EXPENDITURE		Event Expense	se						le of Texas. Com officeholder living	plete Schedule T. Lexpense	
							I	Food for cam			copense	
									1	5		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Office	holder name	C	Dffice sou	ght			Office he	eld	
	Date		Payee name									
	09/13/2023		Sugar's Caju	n Cuisine & Ba	ar							
	Amount (\$)		Payee address			Zip Co	de					
	\$1,745.40		3424 FM 109		etato,	, <u></u> .p ee						
	<i>42,1 10110</i>		01211111200	2 11044 / 200								
			Missouri City	TX 77459								
	PURPOSE OF EXPENDITURE		Category _{(See} Food/Bevera	Categories listed at tl ge Expense	he top of this sch	edule)			, TX,	officeholder living	plete Schedule T. expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Office	holder name	C) Dffice sou	ght			Office he	eld	
	Date	1	Payee name									
	08/14/2023		Sunoco									
	Amount (\$)		Payee address	; City;	State	Zip Co	do					
	\$25.93		r ayee address	, City,	State,	, 20 00	uc					
			Houston, TX									
	PURPOSE			Categories listed at t	he top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Travel In Dist	rict							plete Schedule T.	
								Travel for me		officeholder living IGS	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Office	holder name	C	Dffice sou	ght			Office he	eld	

			EXPE	NDITURE CATEGOR	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards nmittee Legal Servio	age Expense Memorials Expense æs	Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expen Travel in District Travel Out of District OTHER (enter a category not listed above)	
				uction Guide explains I	how to con	plete this form.			
1	Total pages Schedule F1:	2					3	Filer ID (Ethics Commission F	-ilers)
	Sch: 49/57 Rpt: 77/86		Reynolds, Ronald E	. (The Honorable)				00062098	
4	Date	5	Payee name						
	07/24/2023		T-Mobile						
6	Amount (\$)	7	Payee address; C	ty; State;	Zip Cod	le			
	\$202.60		6947 Gall Blvd						
			Zephyrhills, FL 3354	2					
_	BUBBOOF								
8	PURPOSE OF	(a)	Category (See Categorie		edule)	b) Description	outei	ide of Texas. Complete Schedule T.	
	EXPENDITURE		Office Overhead/Re	ntal Expense				, officeholder living expense	
						Phone servic			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder	name C	Dffice soug	ht		Office held	
	Date		Payee name						
	08/24/2023		T-Mobile						
	Amount (\$)	-		ty; State;	Zip Cod				
				iy, Sidle,	21p C00	le			
	\$232.86		6947 Gall Blvd						
			Zephyrhills, FL 3354	2					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categorie Office Overhead/Re		edule)		I, TX	ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder	name C	Dffice soug	ht		Office held	
	Date		Payee name						
	09/23/2023		T-Mobile						
	Amount (\$)		Payee address; C	ty; State;	Zip Cod	le			
	\$101.90		6947 Gall Blvd	iy, State,					
	φ101.50		0347 Gail Diva						
			Zephyrhills, FL 3354	2					
	PURPOSE OF	(a)	Category (See Categorie		edule)	b) Description			
	EXPENDITURE		Office Overhead/Re	ntal Expense			I, TX	ide of Texas. Complete Schedule T. , officeholder living expense	
-	Complete ONLY if direct	L(Candidate/Officeholder	name C	Office soug	ht		Office held	
	expenditure to benefit C/Oł			-					
-									

			EXPENDITURE C	CATEGORIES	FOR BO	OX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services	Offic Polli ense Prin Sala	ce Overhea ng Expens ting Expens tries/Wages	se s/Contract Labor	Transportation I Travel in Distric Travel Out of D	
			The Instruction Guide	explains how	to compl	ete this form.		
1	Total pages Schedule F1:	2 FILER N	AME				3 Filer ID	(Ethics Commission Filers)
	Sch: 50/57 Rpt: 78/86	Reynol	ds, Ronald E. (The Hon	iorable)			00062098	
4	Date	5 Payee n	ame					
	10/17/2023	T-Mobil	e					
6	Amount (\$)	7 Payee a	ddress; City;	State; Zip	Code			
	\$234.85	6947 G	all Blvd					
		Zephyr	nills, FL 33542					
8	PURPOSE				(b)	Description		
°	OF		(See Categories listed at the to Dverhead/Rental Expen		(0)	Description	outside of Texas. Con	nplete Schedule T.
	EXPENDITURE			130			, TX, officeholder livin	
						Phone servic	е	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		e/Officeholder name	Office	sought		Office h	eld
	Date	Payee n	ame					
	11/21/2023	T-Mobil						
	Amount (\$)	Payee a	ddress; City;	State; Zip	Code			
	\$408.61	6947 G		01010, 21				
	\$+00.01	00410						
		Zephyr	nills, FL 33542					
	PURPOSE OF EXPENDITURE		Y (See Categories listed at the to Dverhead/Rental Expen		(b)		outside of Texas. Con , TX, officeholder livin e	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		e/Officeholder name	Office	sought		Office h	eld
	Date	Payee n	ame					
	12/05/2023	T-Mobil						
-	Amount (\$)	Payee a	ddress; City;	State; Zip	Code			
	\$327.12	6947 G						
	+							
		Zephyr	nills, FL 33542					
	PURPOSE OF EXPENDITURE		Y (See Categories listed at the to Dverhead/Rental Expen		(b)		outside of Texas. Con , TX, officeholder livin e	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		e/Officeholder name	Office	sought		Office h	eld

				EXPENDITUR	E CATEGOF	RIES FOR	во	X 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fe Fo Gi ittee Le	rent Expense bes iod/Beverage Expense ft/Awards/Memorials E gal Services he Instruction Gu	Expense	Office Over Polling Exp Printing Exp Salaries/Wa	head ense bense ages/	e 'Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	12 EI					·		2	mission Filers)		
1	Sch: 51/57 Rpt: 79/86	1		nald E. (The H	onorable)				3	Filer ID 00062098	(Ethics Conn	
4	Date	5 Pa	ayee name									
	12/30/2023		Mobile									
6	Amount (\$) \$293.16	69	ayee address 947 Gall Blv ephyrhills, F	d	State;	; Zip Coc	le					
8	PURPOSE	(a) Ca	ategory (cae	Categories listed at th	a tan of this och	odulo)	(b)	Description				
	OF EXPENDITURE			ad/Rental Exp		edule)		Check if travel of	, тх,	de of Texas. Comp officeholder living		:
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Office	holder name	C	Office soug	lht			Office he	ld	
	Date	Pa	ayee name									
	11/24/2023	Ta	aco Cabana									
	Amount (\$)	Pa	ayee address	; City;	State;	Zip Coo	le					
	\$198.18		ighway 6 Sc issouri City,									
	PURPOSE OF EXPENDITURE		ategory _{(See} ood/Bevera(Categories listed at th ge Expense	e top of this sch	edule)			, TX,	de of Texas. Comp officeholder living gn volunteer	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Office	holder name	C	Office soug	lht			Office he	ld	
	Date	Pa	ayee name									
	10/14/2023	I	exaco									
	Amount (\$) \$8.01	Pa	ayee address	; City;	State;	; Zip Coo	le					
		(Т)	×									
	PURPOSE OF EXPENDITURE		ategory _{(See} ravel In Dist	Categories listed at th	e top of this sch	edule)			, тх,	de of Texas. Comp officeholder living I GS		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Office	holder name	C	Office soug	Iht			Office he	ld	

			EXPENDITURE CATEGORI	ES FOR	8 BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees C Food/Beverage Expense F Gift/Awards/Memorials Expense F	Office Over Polling Exp Printing Exp Salaries/Wa	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	· · ·			3	Filer ID (Ethics Commission Filers)
-	Sch: 52/57 Rpt: 80/86	2	Reynolds, Ronald E. (The Honorable)			3	00062098
4	Date	5	Payee name				
	07/14/2023		The Caucus				
6	Amount (\$)	7	Payee address; City; State;	Zip Coc	de		
	\$40.00		PO Box 66664				
			Houston, TX 77266				
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedu		(b) Description		
	OF	ľ	Contributions/Donations Made By	iule)	·	outsi	de of Texas. Complete Schedule T.
	EXPENDITURE		Candidate/Officeholder/Political Committ	tee	Check if Austin,	ΤX,	officeholder living expense
					Donation		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Off	fice soug	ght		Office held
	Date		Payee name				
	08/03/2023		The Daniels Group				
	Amount (\$)		Payee address; City; State;	Zip Coc	de		
	\$1,000.00		11811 East Fwy #130				
	\$1,000.00		11011 Last Wy #100				
			Houston, TX 77029				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedu	lule)	(b) Description		
	EXPENDITURE		Contributions/Donations Made By				de of Texas. Complete Schedule T.
			Candidate/Officeholder/Political Committ	tee			officeholder living expense
					Event sponso	151	пр
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name Off	fice soug	gnt		Office held
	Date		Payee name				
	12/17/2023		The Mayflower Hotel				
	Amount (\$)		Payee address; City; State;	Zip Coc	de		
	\$14.58						
			Wshington, DC				
	PURPOSE	(a)	Category (See Categories listed at the top of this schedu	lule)	(b) Description		
			Food/Beverage Expense	,	Check if travel	outsi	de of Texas. Complete Schedule T.
	EXPENDITURE		C 1				officeholder living expense
					Food for mee	ting	g
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Off	fice soug	ght	_	Office held
_							

			EXPENDITU	IRE CATEGOF	RIES FOR	во	X 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Exp Gift/Awards/Memori Legal Services The Instruction	als Expense	Office Over Polling Exp Printing Ex Salaries/W	head ense pense ages/	e Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FII FR NAME					3	Filer ID (Ethics Commission File	ers)
1	Sch: 53/57 Rpt: 81/86		Reynolds, Ronald E. (The	Honorable)					00062098	,
4	Date	5	Payee name							
	10/26/2023		The Young & The Politics							
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	de				
	\$3,000.00									
			Houson, TX							
8	PURPOSE	<u> </u>				(h)	Description			
0	OF	(a)	Category (See Categories listed a	at the top of this sche	edule)	(0)	Description	outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE		Consulting Expense						officeholder living expense	
							🖵 Campaign co			
									C	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	C	Dffice soug	ght			Office held	
_	Date		Payee name							
	11/11/2023		The Young & The Politics							
					7: 0					
	Amount (\$)		Payee address; City;	State;	Zip Coo	je				
	\$2,000.00									
			Houston, TX							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed a Consulting Expense	t the top of this sche	edule)			, TX,	de of Texas. Complete Schedule T. officeholder living expense ulting	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ght			Office held	
	Date		Payee name							
	12/07/2023		Time Wise							
	Amount (\$)	-	Payee address; City;	State:	Zip Co	le				
	\$71.75		6060 Hwy 6	Oluie,	210 000					
	ψ11.15		0000 1100 0							
			Missouri City, TX 77459							
	PURPOSE	(a)	Category (See Categories listed a	at the top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Travel In District						de of Texas. Complete Schedule T.	
	EXPENDITORE								officeholder living expense	
							Travel for me	etir	ngs	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght			Office held	

			EXPENDITURE CATEGORI	IES FOR	BO	K 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Office Over Polling Exp Printing Ex Salaries/W	head/f ense pense ages/C	/Reimbursement Rental Expense Contract Labor e this form.		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
_	Sch: 54/57 Rpt: 82/86		Reynolds, Ronald E. (The Honorable)					00062098
4	Date	5	Payee name					
	10/10/2023		Tom Ramsey Campaign					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le			
	\$1,000.00		PO Box 55385					
			Houston, TX 77255					
8	PURPOSE	(a)			(h) r	Description		
0	OF	(a)	Category (See Categories listed at the top of this sched Contributions/Donations Made By	dule)	ιο) ι Γ	Description	outsio	de of Texas. Complete Schedule T.
	EXPENDITURE		Candidate/Officeholder/Political Commit	ttee	F			officeholder living expense
					(Contribution		
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name Of	ffice sou	jht			Office held
	Date		Payee name					
	11/13/2023		UVC inc.					
_	Amount (\$)		Payee address; City; State;	Zip Co	le			
	\$18.34			210 000				
	ψ10.34							
			Washington, DC					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sched Travel Out of District	dule)			TX,	de of Texas. Complete Schedule T. officeholder living expense trict
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Of	ffice sou	jht			Office held
	Date		Payee name					
	08/19/2023		Uber Eats					
	Amount (\$)		Payee address; City; State;	Zip Co	1e			
	\$50.31		1455 Market Street	2.0 000				
	400.01							
			San Francisco, CA 94103					
	PURPOSE	(a)	Category (See Categories listed at the top of this sched	dule)	(b) [Description		
	OF EXPENDITURE		Food/Beverage Expense		Ē			de of Texas. Complete Schedule T.
					Ļ			officeholder living expense
					ŀ	-oou for cam	pal	gn volunteers
	_							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Of	ffice sou	jht			Office held

			EXPENDITURE CATEO	GORIE	ES FOR	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expla	C F S	Office Overl Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	· · ·				3	Filer ID (Ethics Commission Filers)
L.	Sch: 55/57 Rpt: 83/86	2	Reynolds, Ronald E. (The Honorabl	e)			3	00062098
4	Date	5	Payee name					
	09/07/2023		Uber					
6	Amount (\$) \$24.72	7	Payee address; City; St 1455 Market St #400 San Francisco, CA 94103	ate; 2	Zip Cod	e		
8	PURPOSE	(a)	Category (See Categories listed at the top of this	oobodu		b) Description		
-	OF EXPENDITURE	(,	Travel In District	schedu	uie)	Check if travel	n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense NGS
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Offi	fice soug	ht		Office held
	Date		Payee name					
	10/24/2023		United Airlines					
	Amount (\$)		Payee address; City; St	ate;	Zip Cod	e		
	\$89.00		77 West Wacker Drive, Chicago, IL 60601					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Travel Out of District	schedu	ule) (n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense trict
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Offi	fice soug	ht		Office held
	Date		Payee name					
	10/24/2023		United Airlines					
	Amount (\$) \$158.90		Payee address; City; St 77 West Wacker Drive,	ate; 2	Zip Cod	e		
			Chicago, IL 60601					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Travel Out of District	schedu	ule) (n, TX	ide of Texas. Complete Schedule T. , officeholder living expense trict
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Offi	fice soug	ht		Office held

			EXPENDITURE CA	TEGOF	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expen: Imittee Legal Services The Instruction Guide e:		Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2					3	Filer ID (Ethics Commission Filers)	\neg
-	Sch: 56/57 Rpt: 84/86		Reynolds, Ronald E. (The Hono	rable)			00062098		
4	Date	5	Payee name						
	12/14/2023		United Airlines						
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	le			
	\$134.59		77 West Wacker Drive,						
			Chicago, IL 60601						
	DUDDOCE	<u> </u>	-						
8	PURPOSE OF	(a)	Category (See Categories listed at the top of	of this sch	edule)	(b) Description	oute	ide of Texas. Complete Schedule T.	
	EXPENDITURE		Travel Out of District					, officeholder living expense	
						Travel out of			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Dffice soug	ht		Office held	
	Date		Payee name						-
	08/15/2023		Velero						
		┣─		Ctoto	, Zin Cor				\neg
	Amount (\$)		Payee address; City;	State,	; Zip Coo	ie			
	\$91.59		3708 Texas Pkwy,						
			Missouri City, TX 77489						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of Travel In District	of this sch	edule)		ı, TX	ide of Texas. Complete Schedule T. , officeholder living expense NGS	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	C	Dffice soug	ht		Office held	
	Date		Payee name						_
	10/15/2023		Venton Jones Campaign						
	Amount (\$)		Payee address; City;	State:	; Zip Coo	le			
	\$500.00		1075 Griffin St, West	,					
			,						
			Dallas, TX 75215						
	PURPOSE OF		Category (See Categories listed at the top of		edule)	(b) Description			
	EXPENDITURE		Contributions/Donations Made E Candidate/Officeholder/Political		nittee			ide of Texas. Complete Schedule T.	
-	Complete ONLY if direct	L(andidate/Officeholder name	C	Office soug	Iht		Office held	—
	expenditure to benefit C/Oł					, -			
-									\neg

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica							
	Credit Card Payment The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1: Sch: 57/57 Rpt: 85/86	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Reynolds, Ronald E. (The Honorable) 00062098						
4	Date 12/08/2023	5 Payee name Wal-Mart						
6	Amount (\$) \$83.79	7 Payee address; City; State; Zip Code Highway 6 South Missouri City, TX 77459						
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign materials						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held						

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

SCHEDULE T

The Inst	ruction (Guide explains	1 Total pages Schedule T: Sch: 1/1 Rpt: 86/86						
2 FILER NAME			3 Filer ID (Ethics Commission Filers)						
Reynolds, Ronald E. (The Honorable)					00062098				
4 Name of Contribut	or / Corpor	ation or Labor Orga	·						
Southwest Airlines									
	5 Contribution / Expenditure reported on:								
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D X Schedule F1				
Schedule F2		Schedule F4	Schedule G	Schedule H	Schedule COH-UC				
6 Dates of Travel	6 Dates of Travel 7 Name of person(s) traveling								
	Reyno	olds, Ronald (Rep).)						
	8 Depart	ture city or name of	departure location						
09/20/2023	Houst	on							
	9 Destina	ation citv or name o	f destination location						
09/20/2023	Wash	-							
10 Means of transpor	I tation	11 Purpose of trav	vel (including name of co	onference, seminar, or	other event)				
Commercial Airp		-	al Black Caucus Annı						
		-		_					
1									