#### JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

#### FORM JC/OH COVER SHEET PG 1

| The JC/OH Instruction                               | Guide explains how to o                   | complete this form.               | 1 Filer ID<br>(Ethics Commis<br>00084534 | ,  | 2 Total pages                             | filed:<br>21   |
|---|---|-----------------------------------|--|--|---|--|
| 3 CANDIDATE /<br>OFFICEHOLDER                       | MS / MRS / MR                             | FIRST<br>Oscar M.                 | 1 2200 1004                              | MI                                       | OFFICE                                    | USE ONLY   |
| NAME  |   |                                   |  |  | Date Received<br>ELECTRONIC<br>01/12/2024 | CALLY FILED  |
|   | NICKNAME                                  | LAST<br>Telfair                   |  | SUFFIX<br>III                            | 01/12/2024                                |  |
| 4 CANDIDATE /<br>OFFICEHOLDER<br>MAILING<br>ADDRESS | ADDRESS / PO BOX;<br>7011 Harwin Drive St |                                   | ΓY;                                      | ZIP CODE                                 | Date Hand-delivered                       | or Date Postmarked                                       |
| Change of Address                                   | Houston, TX 77036                         |                                   |  |  | Date Processed                            |  |
|   |   |                                   |  |  | Date Imaged                               |  |
| 5 CAMPAIGN<br>TREASURER<br>NAME                     | MS / MRS / MR<br>Mr.                      | FIRST<br>Michael K.               |  |  | МІ  |  |
|   | NICKNAME                                  | LAST<br>Stewart                   |  |  | SUFFIX                                    |  |
| 6 CAMPAIGN<br>TREASURER<br>ADDRESS                  | STREET ADDRESS (NO<br>320 E. 24th St.     | D PO BOX PLEASE);                 | APT                                      | / SUITE #; CITY;                         | ST  | TATE; ZIP CODE   |
| (Residence or Business)                             | Houston, TX 77008                         |                                   |  |  |   |  |
| 7 CAMPAIGN<br>TREASURER<br>PHONE                    | AREA CODE F<br>(832) 622-8053             | PHONE NUMBER                      | EXTENSION                                |  |   |  |
| 8 REPORT<br>TYPE                                    | X   January 15     July 15                | 30th day before<br>8th day before |  | Runoff Exceeded modified reporting limit | appointment (of                           | ampaign treasurer<br>fficeholder only)<br>ttach C/OH-FR) |
| 9 PERIOD<br>COVERED                                 | Month Day Y<br>07/01/2023                 | ear<br>Ti                         | HROUGH                                   | Month Day<br>12/31/202                   | Year<br>23                                |  |
| 10 ELECTION   | ELECTION DAT<br>Month Day Y<br>03/05/2024 | ear XF                            | Primary<br>General                       | ELECTION TYPE                            | Other                                     |  |
| 11 OFFICE   | OFFICE HELD (if any)                      | I                                 |  | 12 OFFICE SOUGHT<br>District Judge Pl    |   | strict 387th   |
|   |   | GO -                              | TO PAGE 2                                |  |   |  |
| Forms provided by Te                                | exas Ethics Commission                    | www.et                            | thics.state.tx.u                         | 6  | Ve  | rsion V3.5.1.0bfcfb6                                     |

#### JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 21

| <b>13</b> C / OH NAME                          | Telfair III, Oscar M.  |   | 14 Filer ID<br>00084534 | (Ethics Commis     | sion Filers) |  |
|--|--|---|-------------------------|--------------------|--------------|--|
| 15 NOTICE<br>FROM<br>POLITICAL<br>COMMITTEE(S) | This box is for notice of candidate / officeholder. <i>consent.</i> Candidates an                            | the candidate's or offic  | eholder's knowle        | edge or            |              |  |
| Additional Pages                               | COMMITTEE TYPE   | COMMITTEE TYPE COMMITTEE NAME   |                         |                    |              |  |
|  | GENERAL  | COMMITTEE ADDRESS   |                         |                    |              |  |
|  |  |   |                         |                    |              |  |
|  |  |   |                         |                    |              |  |
|  |  | COMMITTEE CAMPAIGN TREASURER NAME   |                         |                    |              |  |
|  |  | COMMITTEE CAMPAIGN TREASURER ADDRES   | SS                      |                    |              |  |
|  |  |   |                         |                    |              |  |
| 16 CONTRIBUTION<br>TOTALS                      |  | IZED POLITICAL CONTRIBUTIONS(OTHER THAN<br>ES OF LOANS, OR CONTRIBUTIONS MADE ELEC                      | , , ,                   | \$                 | 1,031.15     |  |
|  |  | ICAL CONTRIBUTIONS  | c)                      | \$                 | 9,785.77     |  |
| EXPENDITURE<br>TOTALS                          | (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)         3.       TOTAL UNITEMIZED POLITICAL EXPENDITURES |   | \$                      | 228.60             |              |  |
|  | 4. TOTAL POLIT   | ICAL EXPENDITURES   |                         | \$                 | 11,524.47    |  |
| CONTRIBUTION<br>BALANCE                        | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE<br>REPORTING PERIOD                    |   |                         | \$                 | 564.64       |  |
| OUTSTANDING<br>LOAN TOTALS                     | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY<br>OF THE REPORTING PERIOD             |   |                         | \$                 | 0.00         |  |
| 17 AFFIDAVIT                                   |  | l swear, or affirm, under penalty<br>true and correct and includes al<br>under Title 15, Election Code. |                         |                    |              |  |
|  |  | Os  | car M. Telfair III      |                    |              |  |
|  |  | Signature of  | Candidate or Officeho   | older              |              |  |
| AFFIX NO                                       | TARY STAMP / SEAL AB   | OVE   |                         |                    |              |  |
|  | •  | aid   | , this the              | c                  | lay          |  |
| 0f   | , 20, to c   | ertify which, witness my hand and seal of office.   |                         |                    |              |  |
| Signature of offi                              | cer administering oath   | Printed name of officer administering oath  | Title of office         | er administering ( | oath         |  |
| Forms provided by Te                           | exas Ethics Commission   | n www.ethics.state.tx.us  |                         | Version V3.5       | 5.1.0bfcfb6  |  |

#### м ЈС/ОН **COVER SHEET PG 3**

| FORM |
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|      |

3 of 21

| 18 FILER NAM          |   | 19 Filer ID | (Ethics Commission Filers) |
|-----------------------|---|-------------|----------------------------|
| Telfair III,          |   | 00084534    | 1                          |
| 20 SCHEDUL<br>NAME OF | SUBTOTAL AMOUNT   |             |                            |
| 1. X                  | SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)               |             | <b>\$</b> 9,785.77         |
| 2.                    | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS               |             | \$                         |
| 3.                    | SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)                           |             | \$                         |
| 4.                    | SCHEDULE E(J): LOANS (JUDICIAL)   |             | \$                         |
| 5. X                  | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION           | S           | <b>\$</b> 9,221.13         |
| 6.                    | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                  |             | \$                         |
| 7.                    | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION          | ONS         | \$                         |
| 8.                    | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                             |             | \$                         |
| 9. X                  | SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                    |             | <b>\$</b> 2,303.34         |
| 10.                   | SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS            | OF C/OH     | \$                         |
| 11.                   | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION        | ONS         | \$                         |
| 12.                   | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER | RETURNED    | \$                         |
|                       |   |             |                            |

SUBTOTALS - JC/OH

| The Instruction Guide explains how to complete this form. |   |  | 1 Total pages Schedule A(J)1:<br>Sch: 1/12 Rpt: 4/21 |
|---|---|--|--|
| 2 FILER NAME  |   |  | 3 Filer ID (Ethics Commission Filers)                |
| Telfair III, Os   | scar M.   |  | 00084534   |
| 4 Date  | 5 Full name of contributor out-of-state PAC (ID#: | )                                      | 7 Amount of Contribution (\$)                        |
| 12/19/2023  | Benton, Frederick (Mr.)                           |  | \$250.00   |
|   | 6 Contributor address; City; State; Zip Code      |  |  |
|   |   |  |  |
|   |   |  |  |
|   | Columbus, OH 43203                                |  |  |
| 8 Contributor's F   | Principal Occupation                              | 9 Contributor's Job Title              |  |
| Legal   |   | attorney                               |  |
| 10 Contributor's e  | employer/law firm                                 | <b>11</b> Law firm of contributor's sp | bouse (if any)                                       |
| self  |   |  |  |
| 12 If contributor is                                      | s a child, law firm of parent(s) (if any)         |  |  |
|   |   |  |  |
| Date  | Full name of contributor out-of-state PAC (ID#:   | )                                      | Amount of Contribution (\$)                          |
| 10/25/2023  | Billings, Bonita (Ms.)                            |  | \$104.39   |
|   | Contributor address; City; State; Zip Code        |  |  |
|   |   |  |  |
|   |   |  |  |
|   | Missouri City, TX 77459                           |  |  |
|   | Principal Occupation                              | Contributor's Job Title                |  |
| self  |   | owner                                  |  |
|   | employer/law firm                                 | Law firm of contributor's sp           | bouse (if any)                                       |
| BWB   |   |  |  |
| If contributor is   | s a child, law firm of parent(s) (if any)         |  |  |
|   |   |  |  |
| Date  | Full name of contributor out-of-state PAC (ID#:   | )                                      | Amount of Contribution (\$)                          |
| 10/26/2023  | Bobrick, Robert (Mr.)                             |  | \$100.00   |
|   | Contributor address; City; State; Zip Code        |  |  |
|   |   |  |  |
|   |   |  |  |
|   | Sugar Land, TX 77478                              |  |  |
|   | Principal Occupation                              | Contributor's Job Title                |  |
| retired   | 1 n e   | none                                   |  |
|   | employer/law firm                                 | Law firm of contributor's sp           | oouse (if any)                                       |
| none  |   |  |  |
| If contributor is   | s a child, law firm of parent(s) (if any)         |  |  |
|   |   |  |  |
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| L<br>Forme provided                                       | by Texas Ethics Commission www.ethic              | s state ty us                          | Version V3 5 1 0hfcfh67                              |

| The Instruction Guide explains how to complete this form. |   |  | 1 Total pages Schedule A(J)1:<br>Sch: 2/12 Rpt: 5/21 |
|---|---|--|--|
| 2 FILER NAME  |   |  | 3 Filer ID (Ethics Commission Filers)                |
| Telfair III, Os   | scar M.   |  | 00084534   |
| 4 Date  | 5 Full name of contributor out-of-state PAC (ID#: | )                                      | 7 Amount of Contribution (\$)                        |
| 12/10/2023  | Brown, Conrell (Mr.)                              |  | \$250.00   |
|   | 6 Contributor address; City; State; Zip Code      |  |  |
|   |   |  |  |
|   |   |  |  |
|   | Houston, TX 77007                                 |  |  |
|   | Principal Occupation                              | 9 Contributor's Job Title              |  |
| law firm  |   | attorney                               |  |
| 10 Contributor's e  | employer/law firm                                 | <b>11</b> Law firm of contributor's sp | bouse (if any)                                       |
| self  |   |  |  |
| <b>12</b> If contributor is                               | s a child, law firm of parent(s) (if any)         |  |  |
|   |   |  |  |
| Date  | Full name of contributor out-of-state PAC (ID#:   | )                                      | Amount of Contribution (\$)                          |
| 11/27/2023  | Bryson, Abril (Mr.)                               |  | \$250.00   |
|   | Contributor address; City; State; Zip Code        |  |  |
|   |   |  |  |
|   | Midland, TX 79705                                 |  |  |
| Contributor's   | Principal Occupation                              | Contributor's Job Title                |  |
| sales   |   | owner                                  |  |
|   | employer/law firm                                 | Law firm of contributor's sp           | pouse (if any)                                       |
| Elite Cycles  |   |  |  |
| If contributor is   | s a child, law firm of parent(s) (if any)         |  |  |
|   |   |  |  |
| Date  | Full name of contributor Out-of-state PAC (ID#:   | )                                      | Amount of Contribution (\$)                          |
| 12/19/2023  | Carrier, Jeffery (Mr.)                            |  | \$250.00   |
|   | Contributor address; City; State; Zip Code        |  |  |
|   |   |  |  |
|   |   |  |  |
|   | Richmond, TX 77469                                |  |  |
| Contributor's F   | Principal Occupation                              | Contributor's Job Title                |  |
| Finance   |   | Manager                                |  |
| Contributor's e   | employer/law firm                                 | Law firm of contributor's sp           | bouse (if any)                                       |
| Shell Oil   |   |  |  |
| If contributor is   | s a child, law firm of parent(s) (if any)         |  |  |
|   |   |  |  |
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|--|---|--|--|
| 2 FILER NAME   |   |  | 3 Filer ID (Ethics Commission Filers)                |
| Telfair III, Os  | scar M.   |  | 00084534   |
| 4 Date<br>12/11/2023   | 5 Full name of contributor out-of-state PAC (ID#:<br>Cyprian, Derrick (Mr.) |  | 7 Amount of Contribution (\$)<br>\$500.00            |
|  | 6 Contributor address; City; State; Zip Code                                |  |  |
|  |   |  |  |
|  | Missouri City, TX 77459   |  |  |
|  | Principal Occupation  | 9 Contributor's Job Title              |  |
| Religion   |   | Pastor                                 |  |
| 10 Contributor's e<br>CME Church                             |   | <b>11</b> Law firm of contributor's sp | oouse (if any)                                       |
|  | s a child, law firm of parent(s) (if any)                                   |  |  |
|  |   |  |  |
| Date   | Full name of contributor out-of-state PAC (ID#:                             |  | Amount of Contribution (\$)                          |
| 12/18/2023   | Davis, Willie   | /                                      | \$250.00   |
|  | Contributor address; City; State; Zip Code                                  |  |  |
|  |   |  |  |
|  |   |  |  |
|  | Houston, TX 77048   |  |  |
| Contributor's F  | Principal Occupation  | Contributor's Job Title                |  |
| ministry   |   | Sr Pastor                              |  |
|  | employer/law firm   | Law firm of contributor's sp           | bouse (if any)                                       |
| Palm Comm  | -   |  |  |
|  | s a child, law firm of parent(s) (if any)                                   |  |  |
| Date   | Full name of contributor out-of-state PAC (ID#:                             |  | Amount of Contribution (\$)                          |
| 11/13/2023   | Ervin, Warner (Mr.)   | /                                      | \$100.00   |
|  | Contributor address; City; State; Zip Code                                  |  |  |
|  |   |  |  |
|  |   |  |  |
|  | Manvel, TX 77578  |  |  |
|  | Principal Occupation  | Contributor's Job Title                |  |
| retired none   |   |  |  |
| Contributor's employer/law firm Law firm of contributor's sp |   |  | bouse (if any)                                       |
| none   |   |  |  |
|  | s a child, law firm of parent(s) (if any)                                   |  |  |
|  |   |  |  |
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| The Instruc          | ction Guide explains how to complete this         | 1 Total pages Schedule A(J)1:<br>Sch: 4/12 Rpt: 7/21 |                                       |
|----------------------|---|--|---------------------------------------|
| 2 FILER NAME         |   |  | 3 Filer ID (Ethics Commission Filers) |
| Telfair III, Os      | car M.  |  | 00084534                              |
| 4 Date               | 5 Full name of contributor out-of-state PAC (ID#: | )  | 7 Amount of Contribution (\$)         |
| 12/13/2023           | Fuller, Lanease (Ms.)                             |  | \$600.00                              |
|                      | 6 Contributor address; City; State; Zip Code      |  |                                       |
|                      |   |  |                                       |
|                      | Houston, TX 77027                                 |  |                                       |
| 8 Contributor's F    | Principal Occupation                              | 9 Contributor's Job Title                            |                                       |
| Legal                |   | attorney   |                                       |
| 10 Contributor's e   | mployer/law firm                                  | <b>11</b> Law firm of contributor's sp               | oouse (if any)                        |
| self                 |   |  |                                       |
| 12 If contributor is | s a child, law firm of parent(s) (if any)         |  |                                       |
|                      |   |  |                                       |
| Date                 | Full name of contributor out-of-state PAC (ID#:   | )  | Amount of Contribution (\$)           |
| 12/13/2023           | Fuller, Lanease (Ms.)                             |  | \$250.00                              |
|                      | Contributor address; City; State; Zip Code        |  |                                       |
|                      |   |  |                                       |
|                      |   |  |                                       |
|                      | Houston, TX 77027                                 |  |                                       |
|                      | Principal Occupation                              | Contributor's Job Title                              |                                       |
| Legal                |   | attorney   |                                       |
|                      | mployer/law firm                                  | Law firm of contributor's sp                         | bouse (if any)                        |
| self                 |   |  |                                       |
| If contributor is    | s a child, law firm of parent(s) (if any)         |  |                                       |
|                      |   |  |                                       |
| Date                 | Full name of contributor Out-of-state PAC (ID#:   | )  | Amount of Contribution (\$)           |
| 11/28/2023           | Gautier, Byron (Mr.)                              |  | \$610.00                              |
|                      | Contributor address; City; State; Zip Code        |  |                                       |
|                      |   |  |                                       |
|                      | Missouri City, TX 77459                           |  |                                       |
| Contributor's F      | Principal Occupation                              | Contributor's Job Title                              |                                       |
| sales                |   | manager  |                                       |
| Contributor's e      | employer/law firm                                 | Law firm of contributor's sp                         | oouse (if any)                        |
| Technology           |   |  |                                       |
| If contributor is    | s a child, law firm of parent(s) (if any)         |  |                                       |
|                      |   |  |                                       |
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|---|---|--|--|
| 2 FILER NAME  |   |  | <b>3</b> Filer ID (Ethics Commission Filers)         |
| Telfair III, Os   | scar M.   |  | 00084534   |
| 4 Date  | 5 Full name of contributor out-of-state PAC (ID#: | )                                      | 7 Amount of Contribution (\$)                        |
| 12/11/2023  | Irby, Daryl (Mr.)                                 |  | \$100.00   |
|   | 6 Contributor address; City; State; Zip Code      |  | 1  |
|   |   |  |  |
|   |   |  |  |
|   | Pearland, TX 77584                                |  |  |
| 8 Contributor's F   | Principal Occupation                              | 9 Contributor's Job Title              |  |
| Engineering   |   | Engineer                               |  |
| 10 Contributor's e  | employer/law firm                                 | <b>11</b> Law firm of contributor's sp | oouse (if any)                                       |
| Lubrizol  |   |  |  |
| 12 If contributor is                                      | s a child, law firm of parent(s) (if any)         |  |  |
|   |   |  |  |
| Date  | Full name of contributor out-of-state PAC (ID#:   | )                                      | Amount of Contribution (\$)                          |
| 10/27/2023  | lwuagwu, Chike (Mr.)                              |  | \$104.39   |
|   | Contributor address; City; State; Zip Code        |  |  |
|   |   |  |  |
|   |   |  |  |
|   | Houston, TX 77074                                 |  |  |
|   | Principal Occupation                              | Contributor's Job Title                |  |
| retired   |   | none                                   |  |
|   | employer/law firm                                 | Law firm of contributor's sp           | bouse (if any)                                       |
| none  |   |  |  |
| If contributor is   | s a child, law firm of parent(s) (if any)         |  |  |
|   |   |  |  |
| Date  | Full name of contributor out-of-state PAC (ID#:   | )                                      | Amount of Contribution (\$)                          |
| 12/07/2023  | Jackson, Donald (Mr.)                             |  | \$100.00   |
|   | Contributor address; City; State; Zip Code        |  |  |
|   |   |  |  |
|   |   |  |  |
|   | Sugar Land, TX 77498                              | <u> </u>                               |  |
|   | Principal Occupation                              | Contributor's Job Title                |  |
| retired   | and the set from the set                          | none                                   |  |
| none  | employer/law firm                                 | Law firm of contributor's sp           | Jouse (II any)                                       |
|   | s a child, law firm of parent(s) (if any)         |  |  |
|   | s a child, law littl of parent(s) (if any)        |  |  |
|   |   |  |  |
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|--|---|------------------------------------|--|
| 2 FILER NAME<br>Telfair III, Os                              | car M.  |                                    | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084534 |
| 4 Date<br>12/02/2023   |   |                                    | 7 Amount of Contribution (\$)<br>\$260.22                |
|  | Houston, TX 77033   |                                    |  |
| 8 Contributor's P<br>nonprofit                               | rincipal Occupation   | 9 Contributor's Job Title<br>Staff |  |
| <b>10</b> Contributor's en<br>Light Accomm                   |   | 11 Law firm of contributor's sp    | oouse (if any)   |
| 12 If contributor is   | a child, law firm of parent(s) (if any)   |                                    |  |
| Date<br>12/22/2023   | Full name of contributor       out-of-state PAC (ID#:)         McKamie, Reginald         Contributor address; City; State; Zip Code |                                    | Amount of Contribution (\$)<br>\$250.00                  |
| Contributor's P  | houston, TX 77219<br>rincipal Occupation  | Contributor's Job Title            |  |
| legal  |   | attorney                           |  |
| Contributor's er<br>self                                     | mployer/law firm  | Law firm of contributor's sp       | oouse (if any)   |
| If contributor is  | a child, law firm of parent(s) (if any)   |                                    |  |
| Date<br>12/11/2023   | Full name of contributor out-of-state PAC (ID#:_<br>Osei, Josiah (Mr.)<br>Contributor address; City; State; Zip Code                |                                    | Amount of Contribution (\$)<br>\$150.00                  |
|  | Missouri City, TX 77459   | 1                                  |  |
| Contributor's P<br>retired                                   | rincipal Occupation   | Contributor's Job Title            |  |
| Contributor's employer/law firm Law firm of contributor's sp |   |                                    | oouse (if any)   |
| none   |   |                                    |  |
| If contributor is  | a child, law firm of parent(s) (if any)   |                                    |  |
| Formo providod k   | by Texas Ethics Commission www.ethic  | s.state.tx.us                      | Version V3.5.1.0bfcfb67                                  |

| The Instruction Guide explains how to complete this form. |  |                                 | 1 Total pages Schedule A(J)1:<br>Sch: 7/12 Rpt: 10/21 |
|---|--|---------------------------------|---|
| 2 FILER NAME  |  |                                 | 3 Filer ID (Ethics Commission Filers)                 |
| Telfair III, Os   | scar M.  |                                 | 00084534  |
| 4 Date  | 5 Full name of contributor out-of-state PAC (ID#:_ | )                               | 7 Amount of Contribution (\$)                         |
| 12/20/2023  | Ratliff, Joe Samuel (Rev.)                         |                                 | \$1,000.00  |
|   | 6 Contributor address; City; State; Zip Code       |                                 |   |
|   |  |                                 |   |
|   |  |                                 |   |
|   | Houston, TX 77071                                  |                                 |   |
| 8 Contributor's F   | Principal Occupation                               | 9 Contributor's Job Title       |   |
| Clergy  |  | Pastor                          |   |
| 10 Contributor's e  | employer/law firm                                  | 11 Law firm of contributor's sp | oouse (if any)  |
| Brentwood B   | Baptist  |                                 |   |
| 12 If contributor is                                      | s a child, law firm of parent(s) (if any)          |                                 |   |
|   |  |                                 |   |
| Date  | Full name of contributor out-of-state PAC (ID#:_   | )                               | Amount of Contribution (\$)                           |
| 12/05/2023  | Reese, Dorsey (Mr.)                                |                                 | \$100.00  |
|   | Contributor address; City; State; Zip Code         |                                 |   |
|   |  |                                 |   |
|   |  |                                 |   |
|   | Katy, TX 77450                                     |                                 |   |
| Contributor's F   | Principal Occupation                               | Contributor's Job Title         |   |
| retired   |  | none                            |   |
| Contributor's e   | employer/law firm                                  | Law firm of contributor's sp    | oouse (if any)  |
| none  |  |                                 |   |
| If contributor is   | s a child, law firm of parent(s) (if any)          | •                               |   |
|   |  |                                 |   |
| Date  | Full name of contributor out-of-state PAC (ID#:_   | )                               | Amount of Contribution (\$)                           |
| 10/30/2023  | Robinson, Anna                                     |                                 | \$100.00  |
|   | Contributor address; City; State; Zip Code         |                                 |   |
|   |  |                                 |   |
|   |  |                                 |   |
|   | Bridgeton, NJ 08302                                |                                 |   |
| Contributor's F   | Principal Occupation                               | Contributor's Job Title         |   |
| retired   |  | none                            |   |
| Contributor's e   | employer/law firm                                  | Law firm of contributor's sp    | oouse (if any)  |
| none  |  |                                 |   |
| If contributor is   | s a child, law firm of parent(s) (if any)          |                                 |   |
|   |  |                                 |   |
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| Eorme provided  | hy Texas Ethics Commission www.ethic               | s state tx us                   | Version V3 5 1 0hfcfh67                               |

| The Instruction Guide explains how to complete this form.    |  |  | 1 Total pages Schedule A(J)1:<br>Sch: 8/12 Rpt: 11/21 |
|--|--|--|---|
| 2 FILER NAME   |  |  | <b>3</b> Filer ID (Ethics Commission Filers)          |
| Telfair III, Oscar M.  |  |  | 00084534  |
| 4 Date   | 5 Full name of contributor out-of-state PAC (ID#:_                     | )                                      | 7 Amount of Contribution (\$)                         |
| 12/11/2023   | Ruddock, Yvonne (Ms.)  |  | \$150.00  |
|  | 6 Contributor address; City; State; Zip Code                           |  |   |
|  |  |  |   |
|  |  |  |   |
|  | Missouri City, TX 77459  |  |   |
|  | Principal Occupation   | 9 Contributor's Job Title              |   |
| retired  |  | none                                   |   |
| 10 Contributor's e   | employer/law firm  | <b>11</b> Law firm of contributor's sp | bouse (if any)  |
| none   | s a child, law firm of parent(s) (if any)                              |  |   |
|  | s a child, law littl of parent(s) (if any)                             |  |   |
| Data   |  |  | Amount of Contribution (ft)                           |
| Date<br>10/25/2023   | Full name of contributor out-of-state PAC (ID#:<br>Smith, Leslie (Mr.) | )                                      | Amount of Contribution (\$)<br>\$104.39               |
| 10/23/2023   | Contributor address; City; State; Zip Code                             |  | φ±0 <del>4</del> .55                                  |
|  | Contributor address, City, State, Zip Code                             |  |   |
|  |  |  |   |
|  | Houston, TX 77288  |  |   |
| Contributor's F  | I<br>Principal Occupation  | Contributor's Job Title                | 1   |
| Social Servio  | ce   | CEO                                    |   |
| Contributor's e  | employer/law firm  | Law firm of contributor's sp           | bouse (if any)  |
| CHCDC  |  |  |   |
| If contributor is  | s a child, law firm of parent(s) (if any)                              |  |   |
|  |  |  |   |
| Date   | Full name of contributor out-of-state PAC (ID#:                        | )                                      | Amount of Contribution (\$)                           |
| 11/10/2023   | Stewart, Michael (Mr.)   |  | \$1,000.00  |
|  | Contributor address; City; State; Zip Code                             |  | 1   |
|  |  |  |   |
|  |  |  |   |
|  | Houston, TX 77008  |  |   |
|  | Principal Occupation   | Contributor's Job Title                |   |
| retired none   |  |  |   |
| Contributor's employer/law firm Law firm of contributor's sp |  | bouse (if any)                         |   |
| none   | a a child low firm of parant(a) (if any)                               |  |   |
|  | s a child, law firm of parent(s) (if any)                              |  |   |
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| The Instrue          | ction Guide explains how to complete t       | 1 Total pages Schedule A(J)1:<br>Sch: 9/12 Rpt: 12/21 |  |
|----------------------|--|---|--|
| 2 FILER NAME         |  |   | <b>3</b> Filer ID (Ethics Commission Filers) |
| Telfair III, Os      | car M.                                       |   | 00084534                                     |
|                      |  | C (ID#:)  | 7 Amount of Contribution (\$)                |
| 12/27/2023           | Stewart, Michael (Mr.)                       |   | \$500.00                                     |
|                      | 6 Contributor address; City; State; Zip Code |   |  |
|                      |  |   |  |
|                      | Houston, TX 77008                            |   |  |
| 8 Contributor's F    | Principal Occupation                         | 9 Contributor's Job Title                             |  |
| retired              |  |   |  |
| 10 Contributor's e   | mployer/law firm                             | 11 Law firm of contributor's s                        | pouse (if any)                               |
| none                 |  |   |  |
| 12 If contributor is | s a child, law firm of parent(s) (if any)    | •   |  |
|                      |  |   |  |
| Date                 | Full name of contributor out-of-state PAC    | C (ID#:)  | Amount of Contribution (\$)                  |
| 10/04/2023           | Telfair, Oscar                               |   | \$50.00                                      |
|                      | Contributor address; City; State; Zip Code   |   |  |
|                      |  |   |  |
|                      |  |   |  |
|                      | Missiouri City, TX 77489                     |   |  |
|                      | Principal Occupation                         | Contributor's Job Title                               |  |
| Attorney             |  | Owner   |  |
|                      | employer/law firm                            | Law firm of contributor's s                           | pouse (if any)                               |
| The Telfair F        |  |   |  |
| If contributor is    | s a child, law firm of parent(s) (if any)    |   |  |
|                      |  |   |  |
| Date                 | Full name of contributor out-of-state PAC    | C (ID#:)  | Amount of Contribution (\$)                  |
| 12/02/2023           |  |   | \$104.39                                     |
|                      | Contributor address; City; State; Zip Code   |   |  |
|                      |  |   |  |
|                      | Missiouri City, TX 77489                     |   |  |
| Contributor's F      | Principal Occupation                         | Contributor's Job Title                               |  |
| Attorney             |  | Owner   |  |
|                      | mployer/law firm                             | pouse (if any)  |  |
| The Telfair F        | irm  |   |  |
| If contributor is    | s a child, law firm of parent(s) (if any)    |   |  |
|                      |  |   |  |
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| The Instru                      | ction Guide explains how to complete this  | form.                           | 1 Total pages Schedule A(J)1:<br>Sch: 10/12 Rpt: 13/21   |
|---------------------------------|--|---------------------------------|--|
| 2 FILER NAME<br>Telfair III, Os | scar M.  |                                 | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084534 |
| 4 Date<br>12/18/2023            | 5 Full name of contributor out-of-state PAC (ID#:<br>Telfair, Oscar                                |                                 | 7 Amount of Contribution (\$)<br>\$10.00                 |
|                                 | <ul> <li>6 Contributor address; City; State; Zip Code</li> <li>Missiouri City, TX 77489</li> </ul> |                                 |  |
| 8 Contributor's I               | Principal Occupation   | 9 Contributor's Job Title       | •  |
| Attorney                        |  | owner                           |  |
| 10 Contributor's e              |  | 11 Law firm of contributor's sp | oouse (if any)   |
| The Telfair F                   |  |                                 |  |
| 12 If contributor is            | s a child, law firm of parent(s) (if any)  |                                 |  |
|                                 |  |                                 |  |
| Date                            | Full name of contributor out-of-state PAC (ID#:  | Amount of Contribution (\$)     |  |
| 12/19/2023                      | Telfair, Oscar   |                                 | \$100.00   |
|                                 | Contributor address; City; State; Zip Code   |                                 |  |
|                                 |  |                                 |  |
|                                 |  |                                 |  |
|                                 | Missiouri City, TX 77489   |                                 |  |
|                                 | Principal Occupation   | Contributor's Job Title         |  |
| Attorney                        |  | owner                           |  |
|                                 | employer/law firm  | Law firm of contributor's sp    | bouse (if any)   |
| The Telfair F                   |  |                                 |  |
| If contributor is               | s a child, law firm of parent(s) (if any)  |                                 |  |
|                                 |  |                                 |  |
| Date                            | Full name of contributor out-of-state PAC (ID#:  | )                               | Amount of Contribution (\$)                              |
| 12/20/2023                      | Telfair, Oscar   |                                 | \$150.00   |
|                                 | Contributor address; City; State; Zip Code   |                                 |  |
|                                 |  |                                 |  |
|                                 | Missiouri City, TX 77489   |                                 |  |
| Contributoria                   |  | Contributor's Job Title         |  |
| Attorney                        | Principal Occupation   | owner                           |  |
|                                 | employer/law firm  | Law firm of contributor's sp    |  |
| The Telfair F                   |  |                                 |  |
|                                 | s a child, law firm of parent(s) (if any)  |                                 |  |
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| The Instruc                     | ction Guide explains how to complete this f   | orm.                                      | 1 Total pages Schedule A(J)1:<br>Sch: 11/12 Rpt: 14/21   |
|---------------------------------|---|---|--|
| 2 FILER NAME<br>Telfair III, Os | car M.  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084534 |
| 4 Date<br>12/19/2023            | <ul> <li>5 Full name of contributor out-of-state PAC (ID#:_<br/>Turner, Fredrick</li> <li>6 Contributor address; City; State; Zip Code</li> </ul> | 7 Amount of Contribution (\$)<br>\$250.00 |  |
|                                 | Pearland, TX 77584  |   |  |
| 8 Contributor's F               | rincipal Occupation   | 9 Contributor's Job Title                 | ·  |
| accounting                      |   | owner                                     |  |
| 10 Contributor's e self         | mployer/law firm  | <b>11</b> Law firm of contributor's sp    | oouse (if any)   |
|                                 | a child, law firm of parent(s) (if any)   |   |  |
| Date                            | Full name of contributor Out-of-state PAC (ID#:_  | )   | Amount of Contribution (\$)                              |
| 10/25/2023                      | Uschkrat, James   |   | \$52.45  |
|                                 | Contributor address; City; State; Zip Code<br>Sugar Land, TX 77479  |   |  |
| Contributor's F                 | rincipal Occupation   | Contributor's Job Title                   |  |
| retired                         |   | none                                      |  |
| Contributor's e<br>none         | mployer/law firm  | Law firm of contributor's sp              | bouse (if any)   |
| If contributor is               | a child, law firm of parent(s) (if any)   |   |  |
| Date                            | Full name of contributor out-of-state PAC (ID#:_  | )   | Amount of Contribution (\$)                              |
| 12/12/2023                      | Uschkrat, James   |   | \$104.39   |
|                                 | Contributor address; City; State; Zip Code  |   |  |
|                                 | Sugar Land, TX 77479  | 1   |  |
|                                 | rincipal Occupation   | Contributor's Job Title                   |  |
| retired                         |   | none                                      |  |
| none                            | mployer/law firm  | Law firm of contributor's sp              | oouse (if any)   |
|                                 | a child, law firm of parent(s) (if any)   |   |  |
|                                 |   |   |  |
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| The Instruction Guide explains how to complete this                 | 1 Total pages Schedule A(J)1:<br>Sch: 12/12 Rpt: 15/21 |  |
|---|--|--|
| 2 FILER NAME  |  | <b>3</b> Filer ID (Ethics Commission Filers) |
| Telfair III, Oscar M.   |  | 00084534                                     |
| 4 Date 5 Full name of contributor out-of-state PAC (IDa             | #:)  | 7 Amount of Contribution (\$)                |
| 12/21/2023 Willamson, Ronald (Mr.)                                  |  | \$100.00                                     |
| 6 Contributor address; City; State; Zip Code                        |  |  |
|   |  |  |
| Friendswood, TX 77546   |  |  |
| 8 Contributor's Principal Occupation                                | 9 Contributor's Job Title                              | 1  |
| retired   | none   |  |
| 10 Contributor's employer/law firm                                  | <b>11</b> Law firm of contributor's sp                 | pouse (if any)                               |
| none  |  |  |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any) |  |  |
|   |  |  |
| Date Full name of contributor out-of-state PAC (ID;                 | #:)  | Amount of Contribution (\$)                  |
| 12/20/2023 payne, j   |  | \$250.00                                     |
| Contributor address; City; State; Zip Code                          |  |  |
|   |  |  |
|   |  |  |
| houston, TX 77006   |  |  |
| Contributor's Principal Occupation                                  | Contributor's Job Title                                |  |
| legal   | attorney   |  |
| Contributor's employer/law firm                                     | Law firm of contributor's sp                           | bouse (if any)                               |
| self  |  |  |
| If contributor is a child, law firm of parent(s) (if any)           |  |  |
|   |  |  |
| Date Full name of contributor out-of-state PAC (IDa                 | #:)  | Amount of Contribution (\$)                  |
| 11/09/2023 stephens, peyton   |  | \$150.00                                     |
| Contributor address; City; State; Zip Code                          |  |  |
|   |  |  |
| cathedral city, CA 92234  |  |  |
| Contributor's Principal Occupation                                  | Contributor's Job Title                                |  |
| recreation  | consultant   |  |
| Contributor's employer/law firm                                     | Law firm of contributor's sp                           | pouse (if any)                               |
| self  |  |  |
| If contributor is a child, law firm of parent(s) (if any)           |  |  |
|   |  |  |
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| POLITICAL EXPENDITURES FROM POLITICAL |
|---------------------------------------|
| CONTRIBUTIONS                         |

#### SCHEDULE F1

|   | EXPENDITURE CATEGORIES FOR BOX 8(a)   |   |                |                           |   |                            |                 |       |                       |                            |
|---|---|---|----------------|---------------------------|---|----------------------------|-----------------|-------|-----------------------|----------------------------|
|   | Advertising Expense<br>Accounting/Banking<br>Consulting Expense<br>Contributions/ Donations Made By<br>Candidate/Officeholder/Politica<br>Credit Card Payment | Fees         Office Overhead/Rental Expense           Food/Beverage Expense         Polling Expense           y -         Gift/Awards/Memorials Expense |                |                           | Travel in District<br>Travel Out of Dis | quipment & Related Expense |                 |       |                       |                            |
| 1 | Total pages Schedule F1:  | 2   | FILER NAM      | E                         |   |                            |                 | 3     | Filer ID              | (Ethics Commission Filers) |
|   | Sch: 1/4 Rpt: 16/21   |   | Telfair III, C | Dscar M.                  |   |                            |                 |       | 00084534              |                            |
| 4 | Date  | 5   | Payee name     | 9                         |   |                            |                 | -     |                       |                            |
|   | 12/31/2023  |   | Amegy Bar      | ık                        |   |                            |                 |       |                       |                            |
| 6 | Amount (\$)   | 7   | Payee addre    | ess; City;                | State;                                  | ; Zip Co                   | de              |       |                       |                            |
|   | \$4.00  |   | P. O. Box 2    | 27459                     |   |                            |                 |       |                       |                            |
|   |   |   |                |                           |   |                            |                 |       |                       |                            |
|   |   |   | Houston, T     | X 77227                   |   |                            |                 |       |                       |                            |
| 8 | PURPOSE   | (a)   | Category (s    | ee Categories listed at t | he top of this sch                      | edule)                     | (b) Description |       |                       |                            |
|   | OF<br>EXPENDITURE   |   | Fees           |                           |   | ,                          | Check if travel |       | ide of Texas. Com     |                            |
|   |   |   |                |                           |   |                            | Bank Accour     |       | , officeholder living | ) expense                  |
|   |   |   |                |                           |   |                            | Ballk Accourt   | it ie | 200                   |                            |
| 9 | Complete ONIL V if direct   |   | Condidate/Off  | iocholdor pomo            |   | Office cou                 | abt             |       | Office by             |                            |
| ຶ | Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH  |   |                |                           |   |                            |                 |       |                       |                            |
|   | Date  |   | Payee name     | •                         |   |                            |                 |       |                       |                            |
|   | 12/29/2023  |   | Ft. Bend D     | emocratic Party           |   |                            |                 |       |                       |                            |
|   | Amount (\$)   |   | Payee addre    | ess; City;                | State;                                  | ; Zip Co                   | de              |       |                       |                            |
|   | \$1,500.00  |   | 13515 Sou      | thwest Freeway            |   |                            |                 |       |                       |                            |
|   |   |   | Suite 204      |                           |   |                            |                 |       |                       |                            |
|   |   |   | Sugar Land     | l, TX 77478               |   |                            |                 |       |                       |                            |
|   | PURPOSE   | (a)   | Category (S    | ee Categories listed at t | he top of this sch                      | edule)                     | (b) Description |       |                       |                            |
|   | OF<br>EXPENDITURE   |   | Fees           |                           |   |                            |                 |       | ide of Texas. Com     |                            |
|   |   |   |                |                           |   |                            | Candidate fili  |       | , officeholder living | j expense                  |
|   |   |   |                |                           |   |                            |                 | ing   |                       |                            |
|   | Complete ONLY if direct   |   | Candidate/Off  | iceholder name            |   | Dffice sou                 | ght             |       | Office he             | eld                        |
|   | expenditure to benefit C/OI   | Н   |                |                           |   | ,                          | 5               |       |                       |                            |
|   | Date  |   | Payee name     |                           |   |                            |                 |       |                       |                            |
|   | 12/12/2023  |   | 2              | emocratic Party           |   |                            |                 |       |                       |                            |
|   | Amount (\$)   |   | Payee addre    | -                         | State:                                  | ; Zip Co                   | de              |       |                       |                            |
|   | \$1,000.00  |   |                | thwest Freeway            |   |                            |                 |       |                       |                            |
|   |   |   | Suite 204      | -                         |   |                            |                 |       |                       |                            |
|   |   |   | Sugar Land     | 1, TX 77478               |   |                            |                 |       |                       |                            |
|   | PURPOSE   | (a)   | -              | ee Categories listed at t | he ten of this seh                      | odulo)                     | (b) Description |       |                       |                            |
|   | OF  |   | Advertising    |                           |   | leuule)                    |                 | outsi | ide of Texas. Com     | plete Schedule T.          |
|   | EXPENDITURE   |   | 0              | ·                         |   |                            |                 |       | , officeholder living |                            |
|   |   |   |                |                           |   |                            | Joint democr    | atic  | c candidates          | advertising materials      |
|   | 0 1. 0  |   |                |                           |   | 2.47                       |                 |       | ~~~                   |                            |
|   | Complete <u>ONLY</u> if direct expenditure to benefit C/OF  |   | andidate/Off   | iceholder name            | C                                       | Office sou                 | gnt             |       | Office he             | eia                        |
|   |   |   |                |                           |   |                            |                 |       |                       |                            |
|   |   |   |                |                           |   |                            |                 |       |                       |                            |

| POLITICAL EXPENDITURES FROM POLITICAL |  |
|---------------------------------------|--|
| CONTRIBUTIONS                         |  |

#### SCHEDULE F1

|   | EXPENDITURE CATEGORIES FOR BOX 8(a)   |  |   |                              |   |     |        |  |
|---|---|--|---|------------------------------|---|-----|--------|--|
|   | Advertising Expense<br>Accounting/Banking<br>Consulting Expense<br>Contributions/ Donations Made By<br>Candidate/Officeholder/Politica<br>Credit Card Payment | Fees         Office Overhead/Rental Expense         Transporta           Food/Beverage Expense         Polling Expense         Travel in E           y -         Gift/Awards/Memorials Expense         Printing Expense         Travel Out |   |                              | Solicitation/Fundraising Expense<br>Transportation Equipment & Related Expense<br>Travel in District<br>Travel Out of District<br>OTHER (enter a category not listed above) |     |        |  |
| 1 | Total pages Schedule F1:  | 2  | FILER NAME  |                              |   |     | 3      | Filer ID (Ethics Commission Filers)  |
|   | Sch: 2/4 Rpt: 17/21   |  | Telfair III, Oscar M.   |                              |   |     |        | 00084534   |
| 4 | Date<br>12/04/2023  |  | Payee name<br>M3Graphics  |                              |   |     |        |  |
| 6 | Amount (\$)<br>\$656.59   |  | Payee address; City<br>11730 S Wilcrest Dr<br>Houston, TX 77099 | ; State;                     | Zip Co  | de  |        |  |
| 8 | PURPOSE<br>OF<br>EXPENDITURE  |  | Category <sub>(See Categories li</sub><br>Advertising Expense   | sted at the top of this scho | edule)  |     | ı, ТХ, | de of Texas. Complete Schedule T.<br>officeholder living expense<br>cards      |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF  |  | andidate/Officeholder na  | ime C                        | Office sou  | ght |        | Office held  |
|   | Date  |  | Payee name  |                              |   |     |        |  |
|   | 12/27/2023  |  | MR JI Connections   |                              |   |     |        |  |
|   | Amount (\$)<br>\$633.26   |  | Payee address; City<br>PO Boc 2082<br>Missouri City, TX 774     | · · ·                        | ; Zip Co  | de  |        |  |
|   | PURPOSE<br>OF<br>EXPENDITURE  |  | Category <sub>(See Categories li<br/>Advertising Expense</sub>  | sted at the top of this scho | edule)  |     |        | de of Texas. Complete Schedule T.<br>officeholder living expense               |
|   | Complete <u>ONLY</u> if direct expenditure to benefit C/OF  |  | andidate/Officeholder na  | ime C                        | Office sou  | ght |        | Office held  |
|   | Date  |  | Payee name  |                              |   |     |        |  |
|   | 12/31/2023  |  | PayPal  |                              |   |     |        |  |
|   | Amount (\$)<br>\$183.88   |  | Payee address; City<br>12312 Port Grace Bot                     |                              | ; Zip Co  | de  |        |  |
|   |   |  | La Vista, NE 68128  |                              |   |     |        |  |
|   | PURPOSE<br>OF<br>EXPENDITURE  |  | Category (See Categories II<br>Fees                             | sted at the top of this sch  | edule)  |     | ı, ТХ, | de of Texas. Complete Schedule T.<br>officeholder living expense<br>ssing fees |
|   | Complete ONLY if direct expenditure to benefit C/OF   |  | andidate/Officeholder na  | ime C                        | Office sou  | ght |        | Office held  |
|   |   |  |   |                              |   |     |        |  |

|   | POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS   |  |                            |  |  |  |  |  |
|---|---|--|----------------------------|--|--|--|--|--|
|   | Advertising Expense<br>Accounting/Banking<br>Consulting Expense<br>Contributions/ Donations Made By<br>Candidate/Officeholder/Politica<br>Credit Card Payment | y - Gift/Awards/Memorials Expense Polling Expense Travel in District<br>Travel out of Dis  | quipment & Related Expense |  |  |  |  |  |
| 1 | Total pages Schedule F1:<br>Sch: 3/4 Rpt: 18/21   |  | (Ethics Commission Filers) |  |  |  |  |  |
| 4 | Date<br>12/27/2023  | 5 Payee name<br>Sprint2Print   |                            |  |  |  |  |  |
| 6 | Amount (\$)<br>\$1,643.40   | <ul> <li>Payee address; City; State; Zip Code</li> <li>8748 Clay Rd.</li> <li>Ste. 300</li> <li>Houston, TX 77080</li> </ul>   |                            |  |  |  |  |  |
| 8 | PURPOSE<br>OF<br>EXPENDITURE  | <ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Advertising Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Com</li> <li>Check if Austin, TX, officeholder living</li> <li>Posters/pushcards/banners</li> </ul> |                            |  |  |  |  |  |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/O   | Candidate/Officeholder name Office sought Office he<br>H   | eld                        |  |  |  |  |  |
|   | Date<br>12/27/2023<br>Amount (\$)<br>\$2,600.00   | Payee name<br>Sprint2Print<br>Payee address; City; State; Zip Code<br>8748 Clay Rd.  |                            |  |  |  |  |  |
|   |   | Ste. 300<br>Houston, TX 77080  |                            |  |  |  |  |  |
|   | PURPOSE<br>OF<br>EXPENDITURE  | <ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Advertising Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Com</li> <li>Check if Austin, TX, officeholder living</li> <li>Posters/pushcards/banners</li> </ul> | •                          |  |  |  |  |  |
|   | Complete <u>ONLY</u> if direct expenditure to benefit C/Oł  | Candidate/Officeholder name Office sought Office he<br>H   | eld                        |  |  |  |  |  |
|   | Date<br>11/14/2023  | Payee name<br>ascenovation IIc   |                            |  |  |  |  |  |
|   | Amount (\$)<br>\$500.00   | Payee address; City; State; Zip Code<br>6565 holister<br>ste 213<br>houston, TX 77040  |                            |  |  |  |  |  |
|   | PURPOSE<br>OF<br>EXPENDITURE  | <ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Com</li> <li>Check if Austin, TX, officeholder living</li> <li>Consulting for events</li> </ul>                                  |                            |  |  |  |  |  |
|   | Complete <u>ONLY</u> if direct expenditure to benefit C/O   | Candidate/Officeholder name Office sought Office he<br>H   | əld                        |  |  |  |  |  |
|   |   |  |                            |  |  |  |  |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

|   |  |            |                 | EXPENDITURE C  | ATEGOF       | RIES FOR                                  | R BC                     | X 8(a)             |       |   |                            |  |
|---|--|------------|-----------------|--|--------------|---|--------------------------|--------------------|-------|---|----------------------------|--|
|   | Advertising Expense<br>Accounting/Banking<br>Consulting Expense<br>Contributions/ Donations Made By<br>Candidate/Officeholder/Politica | -<br>I Con |                 | Event Expense<br>Fees<br>Food/Beverage Expense<br>Gift/Awards/Memorials Expe<br>Legal Services | nse          | Office Ove<br>Polling Exp<br>Printing Exp | erheac<br>pense<br>kpens |                    |       | Travel in District<br>Travel Out of Distr | uipment & Related Expense  |  |
|   | Credit Card Payment  |            |                 | The Instruction Guide  | explains l   | how to co                                 | mple                     | te this form.      |       |   |                            |  |
| 1 | Total pages Schedule F1:   | 2          | FILER NAME      |  |              |   |                          |                    | 3     | Filer ID                                  | (Ethics Commission Filers) |  |
|   | Sch: 4/4 Rpt: 19/21  |            | Telfair III, Os | scar M.  |              |   |                          |                    |       | 00084534                                  |                            |  |
| Δ | Date   | 5          | Payee name      |  |              |   |                          |                    |       |   |                            |  |
| - | 11/15/2023   |            | quail valley g  | rolf course  |              |   |                          |                    |       |   |                            |  |
| _ |  |            |                 |  | <b>.</b>     |   |                          |                    |       |   |                            |  |
| 6 | Amount (\$)  |            | Payee addres    |  | State;       | Zip Co                                    | de                       |                    |       |   |                            |  |
|   | \$500.00   |            | 2880 la quin    | ta dr  |              |   |                          |                    |       |   |                            |  |
|   |  |            |                 |  |              |   |                          |                    |       |   |                            |  |
|   |  |            | missouri city   | , TX 77459   |              |   |                          |                    |       |   |                            |  |
| 8 | PURPOSE  | (a)        | Category (Se    | e Categories listed at the top   | of this sche | edule)                                    | (b)                      | Description        |       |   |                            |  |
|   | OF<br>EXPENDITURE  |            | Event Exper     |  |              | ,   |                          | Check if travel of |       | de of Texas. Compl                        |                            |  |
|   | EXPENDITORE  |            |                 |  |              |   |                          |                    |       | officeholder living e                     | expense                    |  |
|   |  |            |                 |  |              |   |                          | Campaign Go        | olf t | ournament                                 |                            |  |
|   |  |            |                 |  |              |   |                          |                    |       |   |                            |  |
| 9 | Complete ONLY if direct  |            | Candidate/Offic | eholder name   | С            | Office sou                                | ght                      |                    |       | Office hel                                | d                          |  |
|   | expenditure to benefit C/OI  | 1          |                 |  |              |   |                          |                    |       |   |                            |  |
|   |  |            |                 |  |              |   |                          |                    |       |   |                            |  |
|   |  |            |                 |  |              |   |                          |                    |       |   |                            |  |
|   |  |            |                 |  |              |   |                          |                    |       |   |                            |  |
|   |  |            |                 |  |              |   |                          |                    |       |   |                            |  |
|   |  |            |                 |  |              |   |                          |                    |       |   |                            |  |

| POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G                                     |   |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|
| Advertising Expense<br>Accounting/Banking<br>Consulting Expense                           | Fees Office O<br>Food/Beverage Expense Polling E  | epayment/Reimbursement Solicitation/Fundraising Expense<br>verhead/Rental Expense Transportation Equipment & Related Expense<br>Expense Travel in District         |  |  |  |  |  |
| Contributions/ Donations Made B<br>Candidate/Officeholder/Politica<br>Credit Card Payment |   | Expense     Travel Out of District       /Wages/Contract Labor     OTHER (enter a category not listed above)       complete this form.     The complete this form. |  |  |  |  |  |
| 1 Total pages Schedule G:<br>Sch: 1/2 Rpt: 20/21  | 2 FILER NAME<br>Telfair III, Oscar M.   | 3 Filer ID (Ethics Commission Filers)<br>00084534  |  |  |  |  |  |
| 4 Date<br>10/05/2023  | 5 Payee name<br>Olive Garden  |  |  |  |  |  |  |
| 6 Amount (\$)<br>\$301.36   | <ul> <li>Payee address; City; State; Zip C<br/>10327 HWY 6</li> </ul>                     | Code   |  |  |  |  |  |
| X         Reimbursement from political contributions intended                             | political contributions   |  |  |  |  |  |  |
| 8 PURPOSE<br>OF<br>EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | (b) Description Check if travel outside of Texas. Complete Schedule T.<br>Check if Austin, TX, officeholder living expense<br>Organizational meeting               |  |  |  |  |  |
| 9 Complete <u>ONLY</u> if direct<br>expenditure to benefit<br>C/OH                        | Candidate/Officeholder name   | Office sought Office held  |  |  |  |  |  |
| Date  | Payee name  |  |  |  |  |  |  |
| 12/02/2023  | Richard Malone  |  |  |  |  |  |  |
| Amount (\$)<br>\$500.00   | Payee address; City; State; Zip C<br>10103 Fondren  | code   |  |  |  |  |  |
| X Reimbursement from political contributions intended                                     | 210<br>Houston, TX 77096  |  |  |  |  |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Advertising Expense       | Description Check if travel outside of Texas. Complete Schedule T.<br>Check if Austin, TX, officeholder living expense<br>Pushcards/T shirts/Banners               |  |  |  |  |  |
| Complete <u>ONLY</u> if direct<br>expenditure to benefit<br>C/OH                          | Candidate/Officeholder name   | Office sought Office held  |  |  |  |  |  |
| Date  | Payee name  |  |  |  |  |  |  |
| 10/25/2023  | Toast Tab B Wine  |  |  |  |  |  |  |
| Amount (\$)<br>\$582.37   | Payee address; City; State; Zip C<br>8027 Hwy 6   | code   |  |  |  |  |  |
| X         Reimbursement from political contributions intended                             | 100<br>Missouri City, TX 77459  |  |  |  |  |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense     | Description Check if travel outside of Texas. Complete Schedule T.<br>Check if Austin, TX, officeholder living expense<br>Campaign Kickoff Event                   |  |  |  |  |  |
| Complete <u>ONLY</u> if direct<br>expenditure to benefit<br>C/OH                          | Candidate/Officeholder name   | Office sought Office held  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |

| POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G   |  |   |   |  |  |  |  |
|---|--|---|---|--|--|--|--|
| Advertising Expense<br>Accounting/Banking<br>Consulting Expense<br>Contributions/ Donations Made By<br>Candidate/Officeholder/Politica<br>Credit Card Payment | Fees G<br>Food/Beverage Expense F<br>y - Gift/Awards/Memorials Expense F | oan Repayment/Reinbursement<br>Office Overhead/Rental Expense<br>Polling Expense<br>Printing Expense<br>Salaries/Wages/Contract Labor | Solicitation/Fundraising Expense<br>Transportation Equipment & Related Expense<br>Travel in District<br>Travel Out of District<br>OTHER (enter a category not listed above) |  |  |  |  |
| 1 Total pages Schedule G:<br>Sch: 2/2 Rpt: 21/21  | 2 FILER NAME<br>Telfair III, Oscar M.                                    | :   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084534  |  |  |  |  |
| 4 Date<br>10/13/2023  | 5 Payee name<br>minuteman press  |   |   |  |  |  |  |
| <ul> <li>6 Amount (\$)</li> <li>\$691.01</li> <li>         Reimbursement from political contributions intended     </li> <li>8 PURPOSE</li> </ul>             |  | Zip Code  | Check if travel outside of Texas. Complete Schedule T.  |  |  |  |  |
| OF  | Advertising Expense  | postcards/stickers  | Check if Austin, TX, officeholder living expense  |  |  |  |  |
| 9 Complete <u>ONLY</u> if direct<br>expenditure to benefit<br>C/OH  | Candidate/Officeholder name  | Office sought   | Office held   |  |  |  |  |
|   |  |   |   |  |  |  |  |