

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

| | | | | |
|--|---|--|--|--|
| The C/OH Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00088044 | 2 Total pages filed: 22 | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR | FIRST | MI | |
| | Lauren Ashley | | | |
| | NICKNAME | LAST | SUFFIX | |
| | Simmons | | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; | | ZIP CODE | |
| | PO Box 56386 | | | |
| | Houston, TX 77256 | | | |
| | | | | |
| Date Hand-delivered or Date Postmarked | | OFFICE USE ONLY | | |
| Receipt # | | Amount | | |
| Date Processed | | ELECTRONICALLY FILED | | |
| Date Imaged | | 02/05/2024 | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR | FIRST | MI | |
| | Letty | | | |
| | NICKNAME | LAST | SUFFIX | |
| | Ortega | | | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); | | APT / SUITE #; | CITY; STATE; ZIP CODE |
| | 200 Webster #208 | | | |
| Houston, TX 77002 | | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION | |
| | (832) | 746-2658 | | |
| 8 REPORT TYPE | <input type="checkbox"/> January 15 | <input checked="" type="checkbox"/> 30th day before election | <input type="checkbox"/> Runoff | <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) |
| | <input type="checkbox"/> July 15 | <input type="checkbox"/> 8th day before election | <input type="checkbox"/> Exceeded modified reporting limit | <input type="checkbox"/> Final Report (Attach C/OH-FR) |
| 9 PERIOD COVERED | Month | Day | Year | Month |
| | 01/01/2024 | | | 01/25/2024 |
| 10 ELECTION | ELECTION DATE | | ELECTION TYPE | |
| | Month | Day | Year | |
| | 03/05/2024 | | | |
| | <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> Runoff | <input type="checkbox"/> Other | |
| | <input type="checkbox"/> General | <input type="checkbox"/> Special | | |
| 11 OFFICE | OFFICE HELD (if any) | | 12 OFFICE SOUGHT (if known) | |
| | None | | State Representative District 146 | |

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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| | |
|--|---|
| 13 C / OH NAME Simmons, Lauren Ashley | 14 Filer ID (Ethics Commission Filers) 00088044 |
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| | | | | | | | | | | | | |
|---|--|--------------------------|----------------------------------|--------------------------|-----------------------------------|--|--|---|--|--|--|--|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. | | | | | | | | | | | |
| <table border="1" style="width:100%"> <tr> <td style="width:25%;">COMMITTEE TYPE</td> <td style="width:75%;">COMMITTEE NAME</td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td rowspan="2">COMMITTEE ADDRESS</td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> </tr> <tr> <td colspan="2">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td colspan="2">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table> | COMMITTEE TYPE | COMMITTEE NAME | <input type="checkbox"/> GENERAL | COMMITTEE ADDRESS | <input type="checkbox"/> SPECIFIC | COMMITTEE CAMPAIGN TREASURER NAME | | COMMITTEE CAMPAIGN TREASURER ADDRESS | | | | |
| | COMMITTEE TYPE | COMMITTEE NAME | | | | | | | | | | |
| | <input type="checkbox"/> GENERAL | COMMITTEE ADDRESS | | | | | | | | | | |
| | <input type="checkbox"/> SPECIFIC | | | | | | | | | | | |
| COMMITTEE CAMPAIGN TREASURER NAME | | | | | | | | | | | | |
| COMMITTEE CAMPAIGN TREASURER ADDRESS | | | | | | | | | | | | |

| | | | |
|--------------------------------|---|----|-----------|
| 16 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 4,890.60 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 38,042.68 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 39,986.56 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 0.00 |

17 AFFIDAVIT

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

 Lauren Ashley Simmons
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

_____ Signature of officer administering
 _____ Printed name of officer administering
 _____ Title of officer administering oath

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

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| | | | |
|--|---|--------------------------------|----------------------------|
| 18 FILER NAME Simmons, Lauren Ashley | | 19 Filer ID 00088044 | (Ethics Commission Filers) |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ | 4,740.60 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ | 150.00 |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ | |
| 4. | <input type="checkbox"/> SCHEDULE E: LOANS | \$ | |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | 5,141.71 |
| 6. | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ | 32,389.29 |
| 7. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ | |
| 8. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ | |
| 9. | <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ | 511.68 |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ | |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | |
| 12. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/13 Rpt: 4/22 |
| 2 FILER NAME Simmons, Lauren Ashley | | 3 Filer ID (Ethics Commission Filers) 00088044 |
| 4 Date 01/02/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agiovlasitis, Elli <hr/> 6 Contributor address; City; State; Zip Code Rego Park, NY 11374 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 01/14/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ajnsztajn, Alec <hr/> Contributor address; City; State; Zip Code Houston, TX 77006 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Graduate Researcher | | Employer (See Instructions) Rice University |
| Date 01/23/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, Dewanah <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Occupational Therapist | | Employer (See Instructions) Birchwood of Beaumont |
| Date 01/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Joe <hr/> Contributor address; City; State; Zip Code Austin, TX 78728 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 01/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avalos, Matthew <hr/> Contributor address; City; State; Zip Code Houston, TX 77054 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/13 Rpt: 5/22 |
| 2 FILER NAME Simmons, Lauren Ashley | | 3 Filer ID (Ethics Commission Filers) 00088044 |
| 4 Date 01/16/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blessington, Jennifer | 7 Amount of Contribution (\$) \$25.00 |
| 6 Contributor address; City; State; Zip Code Houston, TX 77035 | | |
| 8 Principal occupation / Job title (See Instructions) Teacher | | 9 Employer (See Instructions) Houston ISD |
| Date 01/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boutchee, Kathy | Amount of Contribution (\$) \$146.00 |
| Contributor address; City; State; Zip Code Manvel, TX 77578 | | |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) U.S. Equal Employment Opportunity Commission |
| Date 01/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broussard, Johanna | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code Houston, TX 77049 | | |
| Principal occupation / Job title (See Instructions) Management | | Employer (See Instructions) Shell Oil Company |
| Date 01/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broussard, Johanna | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code Houston, TX 77049 | | |
| Principal occupation / Job title (See Instructions) Management | | Employer (See Instructions) Shell Oil Company |
| Date 01/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Shelby | Amount of Contribution (\$) \$14.60 |
| Contributor address; City; State; Zip Code Houston, TX 77007 | | |
| Principal occupation / Job title (See Instructions) Finance Director | | Employer (See Instructions) Strong Strategies |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/13 Rpt: 6/22 |
| 2 FILER NAME Simmons, Lauren Ashley | | 3 Filer ID (Ethics Commission Filers) 00088044 |
| 4 Date 01/19/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Celestine, Yolanda <hr/> 6 Contributor address; City; State; Zip Code Sugar Land, TX 77479 | 7 Amount of Contribution (\$) \$150.00 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 01/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers Sauls, Nickia <hr/> Contributor address; City; State; Zip Code Houston, TX 77051 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) |
| Date 01/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cleveland, Vallerie <hr/> Contributor address; City; State; Zip Code Spring Valley, NY 10977 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffin, Robert <hr/> Contributor address; City; State; Zip Code Durham, NC 27703 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) Apple |
| Date 01/09/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Nathan <hr/> Contributor address; City; State; Zip Code Richmond, TX 77407 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/13 Rpt: 7/22 |
| 2 FILER NAME Simmons, Lauren Ashley | | 3 Filer ID (Ethics Commission Filers) 00088044 |
| 4 Date 01/16/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Tiffany <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77449 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 01/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dayton, Anne <hr/> Contributor address; City; State; Zip Code Houston, TX 77096 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Director | | Employer (See Instructions) University of Houston |
| Date 01/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easterling, Myron <hr/> Contributor address; City; State; Zip Code Bennettsville, SC 29512 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Truck Driver | | Employer (See Instructions) First Express |
| Date 01/23/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Jamie <hr/> Contributor address; City; State; Zip Code Houston, TX 77025 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Finance | | Employer (See Instructions) Direct Energy |
| Date 01/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Placido <hr/> Contributor address; City; State; Zip Code Houston, TX 77007 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Grants Manager | | Employer (See Instructions) Texas Majority PAC |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/13 Rpt: 8/22 |
| 2 FILER NAME Simmons, Lauren Ashley | | 3 Filer ID (Ethics Commission Filers) 00088044 |
| 4 Date 01/11/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guillory, Marc | 7 Amount of Contribution (\$) \$25.00 |
| | 6 Contributor address; City; State; Zip Code New Orleans, LA 70122 | |
| 8 Principal occupation / Job title (See Instructions) Vice President | | 9 Employer (See Instructions) Array International LLC |
| Date 01/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guttman, Alan | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77096 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haymon, Ava | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Baton Rouge, LA 70808 | |
| Principal occupation / Job title (See Instructions) Poet in Residence | | Employer (See Instructions) Partnerschool Foundation |
| Date 01/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hearn, Gabrielle | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Missouri City, TX 77489 | |
| Principal occupation / Job title (See Instructions) Reconciliation Manager | | Employer (See Instructions) Stewart Title |
| Date 01/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Gianna | Amount of Contribution (\$) \$5.00 |
| | Contributor address; City; State; Zip Code Wilmington, DE 19805 | |
| Principal occupation / Job title (See Instructions) Pharmaceutical Tech | | Employer (See Instructions) Rite Aid |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/13 Rpt: 9/22 |
| 2 FILER NAME Simmons, Lauren Ashley | | 3 Filer ID (Ethics Commission Filers) 00088044 |
| 4 Date 01/24/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Alma <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77051 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 01/23/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hickson, Ashley <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Higdon, James <hr/> Contributor address; City; State; Zip Code Maryville, TN 37802 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) L'Espace Motorcoach, Inc |
| Date 01/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill Jones, Darla <hr/> Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins, Marshall <hr/> Contributor address; City; State; Zip Code Houston, TX 77049 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Legal Assistant | | Employer (See Instructions) Archer Systems |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/13 Rpt: 10/22 |
| 2 FILER NAME Simmons, Lauren Ashley | | 3 Filer ID (Ethics Commission Filers) 00088044 |
| 4 Date 01/22/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoque, Umme | 7 Amount of Contribution (\$) \$25.00 |
| | 6 Contributor address; City; State; Zip Code Albuquerque, NM 87107 | |
| 8 Principal occupation / Job title (See Instructions) Director, Finance Action Organisers Network | | 9 Employer (See Instructions) Sunrise Project |
| Date 01/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbard, Wanda | Amount of Contribution (\$) \$15.00 |
| | Contributor address; City; State; Zip Code Wilmington, NC 28401 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Susan | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Lakewood, OH 44107 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaRue, John | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78404 | |
| Principal occupation / Job title (See Instructions) Vice President of Institutional Excellence | | Employer (See Instructions) Texas A&M University- Corpus Christi |
| Date 01/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Donna | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77047 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/13 Rpt: 11/22 |
| 2 FILER NAME Simmons, Lauren Ashley | | 3 Filer ID (Ethics Commission Filers) 00088044 |
| 4 Date 01/11/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Jamal | 7 Amount of Contribution (\$) \$25.00 |
| 6 Contributor address; City; State; Zip Code Houston, TX 77020 | | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 01/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mast, Laurance | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code Houston, TX 77048 | | |
| Principal occupation / Job title (See Instructions) Technician | | Employer (See Instructions) AT&T |
| Date 01/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayo, Darryl | Amount of Contribution (\$) \$250.00 |
| Contributor address; City; State; Zip Code Missouri City, TX 77489 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 01/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCann, Emily | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code Allen, TX 75013 | | |
| Principal occupation / Job title (See Instructions) Comms Director | | Employer (See Instructions) NEC America |
| Date 01/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCray, Lisa | Amount of Contribution (\$) \$40.00 |
| Contributor address; City; State; Zip Code Houston, TX 77047 | | |
| Principal occupation / Job title (See Instructions) Nurse Practitioner | | Employer (See Instructions) MD Anderson Cancer Center |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/13 Rpt: 12/22 |
| 2 FILER NAME Simmons, Lauren Ashley | | 3 Filer ID (Ethics Commission Filers) 00088044 |
| 4 Date 01/11/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miranda, Mary Kimberly | 7 Amount of Contribution (\$) \$25.00 |
| | 6 Contributor address; City; State; Zip Code Pearland, TX 78583 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 01/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Camille | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Brookhaven, GA 30329 | |
| Principal occupation / Job title (See Instructions) Cardiologist | | Employer (See Instructions) Atlanta Heart Associates |
| Date 01/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nilan, Maggie | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Lopez, WA 98261 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 01/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norton, Annie | Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77013 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Brenda | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Missouri City, TX 77489 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 10/13 Rpt: 13/22 |
| 2 FILER NAME Simmons, Lauren Ashley | | 3 Filer ID (Ethics Commission Filers) 00088044 |
| 4 Date 01/19/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patton, John <hr/> 6 Contributor address; City; State; Zip Code Indianapolis, IN 46205 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Principal occupation / Job title (See Instructions) HR Manager | | 9 Employer (See Instructions) Eli Lilly and Company |
| Date 01/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Corey <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75149 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Self Employed | | Employer (See Instructions) Self Employed |
| Date 01/23/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Lisa <hr/> Contributor address; City; State; Zip Code Houston, TX 77025 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/23/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Malachi <hr/> Contributor address; City; State; Zip Code Valhalla, NY 10595 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Digital Director | | Employer (See Instructions) National Domestic Workers Alliance |
| Date 01/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santos, Daniel <hr/> Contributor address; City; State; Zip Code Houston, TX 77093 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Teacher | | Employer (See Instructions) Houston ISD |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 11/13 Rpt: 14/22 |
| 2 FILER NAME Simmons, Lauren Ashley | | 3 Filer ID (Ethics Commission Filers) 00088044 |
| 4 Date 01/19/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarantopoulos, George | 7 Amount of Contribution (\$) \$25.00 |
| 6 Contributor address; City; State; Zip Code Los Angeles, CA 90095 | | |
| 8 Principal occupation / Job title (See Instructions) Physician | | 9 Employer (See Instructions) UCLA Medical Center |
| Date 01/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheffield, Gabriel | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code Dallas, TX 75216 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 01/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silver, Jennifer | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code Waldorf, MD 20601 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 01/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, David | Amount of Contribution (\$) \$250.00 |
| Contributor address; City; State; Zip Code Cypress, TX 77429 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/22/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanford, Malcolm | Amount of Contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code Cleveland, OH 44126 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 12/13 Rpt: 15/22 |
| 2 FILER NAME Simmons, Lauren Ashley | | 3 Filer ID (Ethics Commission Filers) 00088044 |
| 4 Date 01/19/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sughrue, Alissa <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78754 | 7 Amount of Contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) Policy Analyst | | 9 Employer (See Instructions) Texas HHSC |
| Date 01/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sung, Anne <hr/> Contributor address; City; State; Zip Code Houston, TX 77063 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Jacki <hr/> Contributor address; City; State; Zip Code Azusa, CA 91702 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Subcontracts Manager | | Employer (See Instructions) JPL |
| Date 01/07/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Michelle <hr/> Contributor address; City; State; Zip Code Houston, TX 77071 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Aurelia <hr/> Contributor address; City; State; Zip Code Houston, TX 77033 | Amount of Contribution (\$) \$55.00 |
| Principal occupation / Job title (See Instructions) Teacher | | Employer (See Instructions) Houston ISD |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 13/13 Rpt: 16/22 |
| 2 FILER NAME Simmons, Lauren Ashley | | 3 Filer ID (Ethics Commission Filers) 00088044 |
| 4 Date 01/03/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Deshaundra | 7 Amount of Contribution (\$) \$25.00 |
| 6 Contributor address; City; State; Zip Code Houston, TX 77047 | | |
| 8 Principal occupation / Job title (See Instructions) Teacher | | 9 Employer (See Instructions) Houston ISD |
| Date 01/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walther, Mary | Amount of Contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code Houston, TX 77021 | | |
| Principal occupation / Job title (See Instructions) Consulting | | Employer (See Instructions) Dini Spheris |
| Date 01/19/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washington, Eleanor | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code Virginia Beach, VA 23464 | | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 01/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Tara | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code Houston, TX 77021 | | |
| Principal occupation / Job title (See Instructions) Teacher | | Employer (See Instructions) Houston ISD |
| Date 01/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Kimberly | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code College Station, TX 77840 | | |
| Principal occupation / Job title (See Instructions) Assistant Director | | Employer (See Instructions) Rice University |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|---|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 1/1 Rpt: 17/22 | |
| 2 FILER NAME Simmons, Lauren Ashley | | 3 Filer ID (Ethics Commission Filers) 00088044 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 01/24/2024 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedrich, Mary Anne | 8 Amount of contribution (\$) \$75.00 | 9 In-kind contribution description Event refreshments |
| | 7 Contributor address; City; State; Zip Code Houston, TX 77096 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | 11 Employer (FOR NON-JUDICIAL) (See instructions) | |
| 12 Contributor's principal occupation (FOR JUDICIAL) | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |
| Date 01/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huebel, Martha | Amount of contribution (\$) \$75.00 | In-kind contribution description Event refreshments |
| | Contributor address; City; State; Zip Code Houston, TX 77035 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | Employer (FOR NON-JUDICIAL) (See instructions) | |
| Contributor's principal occupation (FOR JUDICIAL) | | Contributor's job title (FOR JUDICIAL) (See instructions) | |
| Contributor's employer/law firm (FOR JUDICIAL) | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 1/3 Rpt: 18/22 | 2 FILER NAME Simmons, Lauren Ashley | 3 Filer ID (Ethics Commission Filers) 00088044 |
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|-----------------------------|--------------------------------|
| 4 Date 01/01/2024 | 5 Payee name ActBlue |
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|----------------------------------|--|
| 6 Amount (\$) \$143.98 | 7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144 |
|----------------------------------|--|

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online donation fees |
|---------------------------------|---|--|

| | | | |
|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|--|
| Date 01/22/2024 | Payee name Black Women of Greater Houston PAC |
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| | |
|-------------------------|--|
| Amount (\$) \$150.00 | Payee address; City; State; Zip Code 3139 W. Holcombe Blvd. Suite 420 Houston, TX 77025 |
|-------------------------|--|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership dues |
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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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|--------------------|---------------------|
| Date 01/03/2024 | Payee name Gusto |
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|-------------------------|--|
| Amount (\$) \$106.60 | Payee address; City; State; Zip Code 525 20th Street San Francisco, CA 94107 |
|-------------------------|--|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll processing fees |
|-------------------------------|--|---|

| | | | |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|---|
| 1 Total pages Schedule F1: Sch: 2/3 Rpt: 19/22 | 2 FILER NAME Simmons, Lauren Ashley | 3 Filer ID (Ethics Commission Filers) 00088044 |
| 4 Date 01/11/2024 | 5 Payee name Gusto | |
| 6 Amount (\$) \$953.56 | 7 Payee address; City; State; Zip Code 525 20th Street San Francisco, CA 94107 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held | |
| Date 01/11/2024 | Payee name Gusto | |
| Amount (\$) \$2,097.57 | Payee address; City; State; Zip Code 525 20th Street San Francisco, CA 94107 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held | |
| Date 01/11/2024 | Payee name Houston LGBTQ+ Political Caucus | |
| Amount (\$) \$40.00 | Payee address; City; State; Zip Code P.O. Box 66664 Houston, TX 77266 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership dues |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 3/3 Rpt: 20/22 | 2 FILER NAME Simmons, Lauren Ashley | 3 Filer ID (Ethics Commission Filers) 00088044 |
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| 4 Date 01/20/2024 | 5 Payee name NGP VAN |
|-----------------------------|--------------------------------|

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|----------------------------------|---|
| 6 Amount (\$) \$150.00 | 7 Payee address; City; State; Zip Code 655 15th St. NW Suite 650 Washington, DC 20005 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign database software |
|---------------------------------|---|--|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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|--------------------|--------------------------------------|
| Date 01/25/2024 | Payee name Strong Strategies, LLC |
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|---------------------------|--|
| Amount (\$) \$1,500.00 | Payee address; City; State; Zip Code 325 W. 18th St. Houston, TX 77008 |
|---------------------------|--|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising & compliance services |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F2: Sch: 1/1 Rpt: 21/22 | 2 FILER NAME Simmons, Lauren Ashley | 3 Filer ID (Ethics Commission Filers) 00088044 |
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| 4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS | \$ |
|--|----|

| | |
|-----------------------------|---|
| 5 Date 01/25/2024 | 6 Payee name Grant Martin Campaigns |
|-----------------------------|---|

| | |
|-------------------------------------|---|
| 7 Amount (\$) \$29,389.29 | 8 Payee address; City; State; Zip Code 2383 Bush St San Francisco , CA 94115 |
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| 9 TYPE OF EXPENDITURE | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political |
|------------------------------|--|

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| 10 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Collateral materials, signs, digital ads, database, and eblast service |
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| 11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

| | |
|--------------------|--------------------------------------|
| Date 01/01/2024 | Payee name Strong Strategies, LLC |
|--------------------|--------------------------------------|

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|---------------------------|--|
| Amount (\$) \$3,000.00 | Payee address; City; State; Zip Code 325 W. 18th St. Houston, TX 77008 |
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| | |
|----------------------------|--|
| TYPE OF EXPENDITURE | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political |
|----------------------------|--|

| | | |
|-------------------------------|---|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising & compliance services |
|-------------------------------|---|---|

| | | | |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule G: Sch: 1/1 Rpt: 22/22 | 2 FILER NAME Simmons, Lauren Ashley | 3 Filer ID (Ethics Commission Filers) 00088044 |
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|-----------------------------|-----------------------------|
| 4 Date 01/13/2024 | 5 Payee name Aldi |
|-----------------------------|-----------------------------|

| | |
|--|--|
| 6 Amount (\$) \$11.68 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code 3618 Old Spanish Trail Houston, TX 77021 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refreshments for volunteers |
|---------------------------------|--|--|

| | | | |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|--|
| Date 01/13/2024 | Payee name Houston Black American Democrats |
|--------------------|--|

| | |
|--|---|
| Amount (\$) \$500.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code P.O. Box 88374 Houston, TX 77288 |
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|-------------------------------|--|---|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership dues |
|-------------------------------|--|---|

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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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