#### FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00061342 30 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Mike NAME Date Received **ELECTRONICALLY FILED** 02/05/2024 NICKNAME LAST **SUFFIX** Engelhart CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. George J. NAME NICKNAME LAST **SUFFIX** Engelhart **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 553-6618 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff X appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 01/01/2024 01/25/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/05/2024 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 151 Harris District Judge District 151

**GO TO PAGE 2** 

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM JC/OH COVER SHEET PG 2

2 of 30

13 C / OH NAME	Engelhart, Mike (The	Honorable)	<b>14</b> Filer ID (I 00061342	Ethics Commission Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without I officeholders are required to report this informatio	the candidate's or office	holder's knowledge or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
/ dataonari ages	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION	1. TOTAL UNITEM	ZED POLITICAL CONTRIBUTIONS(OTHER THAI	N PI EDGES I DANS		
TOTALS	\$ 0.00				
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	<b>\$</b> 41,255.00	
EXPENDITURE TOTALS					
		<b>\$</b> 95,113.59			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	<b>\$</b> 166,009.86	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00	
<b>17</b> AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.			
		The Hon	orable Mike Engelhar	t	
		Signature of	Candidate or Officehold	der	
AFFIX NO	TARY STAMP / SEAL ABO	DVE			
		aid	, this the	day	
of	, 20, to ce	ertify which, witness my hand and seal of office.			
Signature of office	cer administering oath	Printed name of officer administering oath	Title of officer	administering oath	

## **SUBTOTALS - JC/OH**

## FORM JC/OH **COVER SHEET PG 3**

					3 of 30
	ER NAM	ME , Mike (The Honorable)	<b>19</b> Filer ID 00061342	(Ethic	s Commission Filers)
		E SUBTOTALS SCHEDULE		5	SUBTOTAL AMOUNT
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	41,255.00
2.		\$			
3.		\$			
4.		\$			
5.	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS				80,885.97
6.	6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS				
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	IONS	\$	
8.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	14,227.62
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$	
12.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	3,133.93

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	tal pages Schedule A(J)1: h: 1/15 Rpt: 4/30
2	FILER NAME Engelhart, M	like (The Honorable)			1	er ID (Ethics Commission Filers) 061342
4	Date 01/24/2024	<ul><li>5 Full name of contributor Agosto, Benny</li><li>6 Contributor address; City;</li></ul>	ss; City; State; Zip Code		<b>7</b> An	nount of Contribution (\$) \$2,000.0
		Houston, TX 77002		1		
8		Principal Occupation		9 Contributor's Job Title		
_	Attorney			Partner		
10		employer/law firm 'atkins, Nichols, Agosto, Aziz	z & Stogner	11 Law firm of contributor's sp	oouse (i	f any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	An	nount of Contribution (\$)
	01/04/2024	Altsuler, Kent  Contributor address; City;	State; Zip Code			\$100.0
		Houston, TX 77057				
		Principal Occupation		Contributor's Job Title		
	Attorney			Mediator		
		employer/law firm		Law firm of contributor's sp	oouse (i	f any)
	Altsuler ADF			Peckar		
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	An	nount of Contribution (\$)
	01/22/2024	Blazquez, Jose	_			\$1,000.0
		Contributor address; City;  Katy, TX 77494	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Founding Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (i	f any)
	Blazquez La	w Office				
	If contributor is	s a child, law firm of parent(s) (i	f any)	•		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 2/15 Rpt: 5/30
2	FILER NAME Engelhart, M	like (The Honorable)			1	Filer ID (Ethics Commission Filers) 00061342
4	Date 01/20/2024	Full name of contributor     Borow, Hilary     Contributor address; City; 9	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$1,000.00
		Houston, TX 77008				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
	Attorney			Partner		
10		employer/law firm		11 Law firm of contributor's sp	oous	e (if any)
40		Bowen, McKinley & Norton,				
12	: II CONTRIBUTOR I	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)
	01/18/2024	Brem, Michael  Contributor address; City; 9	State; Zip Code			\$1,000.00
		Houston, TX 77005				
		Principal Occupation		Contributor's Job Title		
	Attorney			Managing Partner		
		employer/law firm r Diaz-Arrastia Brem LLP		Law firm of contributor's sp UH Law Center (faculty		e (if any)
_			and	On Law Ceriler (laculty	)	
	ii contributor i	s a child, law firm of parent(s) (if	ally)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	01/03/2024	Carbo, Larry				\$250.00
		Contributor address; City; s  Houston, TX 77006	State; Zip Code			
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Labor & Employment C	o-Cl	nair
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Chamberlair	n, Hrdlicka, White, Williams &	Aughtry			
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 3/15 Rpt: 6/30
2	FILER NAME Engelhart, M	like (The Honorable)			3	Filer ID (Ethics Commission Filers) 00061342
4	Date 01/25/2024	<ul><li>5 Full name of contributor Clawater, Wayne</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$1,000.00
		Houston, TX 77005				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Managing Partner		
10		employer/law firm ter & Houston, LLP		11 Law firm of contributor's sp	ous	e (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if	any)	<u> </u>		
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Π	Amount of Contribution (\$)
	01/25/2024	Cone', Misty  Contributor address; City;	<u> </u>			\$2,500.00
		Houston, TX 77008				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Managing Partner		
	Contributor's Cone' PLLC	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	L		
H	Date	Full name of contributor	out-of-state PAC (ID#:	)	Π	Amount of Contribution (\$)
	01/23/2024	DeSimone, Donald	out or state trie (ibm.			\$500.00
		Contributor address; City;  Houston, TX 77027	State; Zip Code		•	
_	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Founding Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	DeSimone L	aw Office				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	otal pages Schedule A(J)1 ch: 4/15 Rpt: 7/30	L:
2	FILER NAME Engelhart, M	like (The Honorable)			1	ler ID (Ethics Commissi 0061342	on Filers)
4	Date 01/03/2024	<ul><li>5 Full name of contributor</li><li>Deaton, Mark</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		<b>7</b> Ai	mount of Contribution (\$)	\$250.00
		Houston, TX 77025					
8		Principal Occupation		9 Contributor's Job Title			
	Attorney			Shareholder			
10		employer/law firm dt Kopf & Harr, P.C.		11 Law firm of contributor's sp	oouse (	if any)	
12		s a child, law firm of parent(s) (i	f any)				
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Ai	mount of Contribution (\$)	
	01/11/2024	Ellison, Marc  Contributor address; City;	State; Zip Code				\$1,500.00
		Sugar Land, TX 77479					
		Principal Occupation		Contributor's Job Title			
	Attorney			Co-President			
	Totz Ellison	employer/law firm		Law firm of contributor's sp	oouse (	if any)	
			f any)				
	ii continutor i	s a child, law firm of parent(s) (i	i airy)				
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Aı	mount of Contribution (\$)	
	01/24/2024	Farah, George	_				\$500.00
		Contributor address; City;  Houston, TX 77006	State; Zip Code				
	Contributor's I	I Principal Occupation		Contributor's Job Title	1		
	Attorney			Founding Attorney			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (	if any)	
	Farah Law G	Group					
	If contributor is	s a child, law firm of parent(s) (i	f any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 5/15 Rpt: 8/30
2	FILER NAME Engelhart, M	like (The Honorable)			3	Filer ID (Ethics Commission Filers) 00061342
4	Date 01/11/2024	<ul><li>5 Full name of contributor Garcia, Matt</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$1,000.00
		Austin, TX 78738				
8		Principal Occupation		9 Contributor's Job Title		
_	Attorney			Managing Member		
10	Barnett & Ga	employer/law firm arcia, PLLC		11 Law firm of contributor's sp	oous	e (if any)
12		s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	01/17/2024	Gibbs, Robin  Contributor address; City;  Houston, TX 77002	State; Zip Code			\$1,000.00
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney	inicipal Occupation		Founding Partner		
_		employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Gibbs & Bru	ns LLP				
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	01/25/2024	Gibson, George  Contributor address; City;  Houston, TX 77056	State; Zip Code			\$1,500.00
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Shareholder		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Nathan Som	mers Jacobs				
	If contributor is	s a child, law firm of parent(s) (i	fany)	•		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	ages Schedule A(J)1 /15 Rpt: 9/30	L:
2	FILER NAME Engelhart, M	like (The Honorable)			3 Filer ID 000613	(Ethics Commissi 342	on Filers)
4	Date 01/23/2024	5 Full name of contributor Grosdidier, Pierre 6 Contributor address; City;	out-of-state PAC (ID#:		7 Amount	t of Contribution (\$)	\$50.00
		Houston, TX 77057					
8	Contributor's F	Principal Occupation		9 Contributor's Job Title			
	Attorney			Sr. Assistant County At			
10		employer/law firm		11 Law firm of contributor's sp	oouse (if any	)	
42		ty Attorney Office	<b>.</b>				
12	in Contributor is	s a child, law firm of parent(s) (i	i any)				
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount	t of Contribution (\$)	
	01/11/2024	Hallman, Katherine  Contributor address; City;	State; Zip Code				\$1,000.00
		Rapid City, SD 57701		_			
		Principal Occupation		Contributor's Job Title			
	Attorney			Trial Lawyer			
		employer/law firm		Law firm of contributor's sp	oouse (if any	)	
	The James I		£ 0.00.0				
	ii contributor i	s a child, law firm of parent(s) (i	rany)				
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount	t of Contribution (\$)	
	01/23/2024	Harrison, Robin	_				\$500.00
		Contributor address; City;  Houston, TX 77005	State; Zip Code				
	Contributor's I	rincipal Occupation		Contributor's Job Title	<u> </u>		
	Attorney			Partner			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any	·)	
	Hicks Thoma	as LLP					
	If contributor is	s a child, law firm of parent(s) (i	f any)	•			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	pages Schedule A(J) 7/15 Rpt: 10/30	L:
2	FILER NAME Engelhart, M	like (The Honorable)			3 Filer ID 00061	) (Ethics Commissi 1342	on Filers)
4	Date 01/09/2024	<ul><li>5 Full name of contributor Harston, Christina</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		<b>7</b> Amour	nt of Contribution (\$)	\$5.00
		Houston, TX 77008					
8		Principal Occupation		9 Contributor's Job Title			
	Fundraiser			Finance Assistant			
10		employer/law firm		11 Law firm of contributor's sp	oouse (if an	y)	
42	Strong Strate	egles LLC s a child, law firm of parent(s) (i	<b>5</b> a.m. A				
12	in Contributor is	s a criliu, iaw iiriri or pareni(s) (i	i any)				
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amour	nt of Contribution (\$)	
	01/18/2024	Kherkher, Steve  Contributor address; City;	State; Zip Code				\$1,000.00
		Houston, TX 77098					
	Contributor's F	Principal Occupation		Contributor's Job Title	•		
	Attorney			Partner			
		employer/law firm		Law firm of contributor's sp	oouse (if an	y)	
	Kherkher Ga						
	If contributor is	s a child, law firm of parent(s) (i	f any)				
=	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amour	nt of Contribution (\$)	
	01/04/2024	Kretzer, Seth	_				\$250.00
		Contributor address; City;  Houston, TX 77002	State; Zip Code				
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Attorney	Tilicipal Occupation		Founding Attorney			
		employer/law firm		Law firm of contributor's sp	oouse (if an	v)	
		f Seth Kretzer				,	
	If contributor is	s a child, law firm of parent(s) (i	f any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 8/15 Rpt: 11/30
2	FILER NAME Engelhart, M	like (The Honorable)			3	Filer ID (Ethics Commission Filers) 00061342
4	Date 01/24/2024	<ul><li>5 Full name of contributor Lehrer, Kenneth</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$250.00
		Houston, TX 77056		T		
8		Principal Occupation		9 Contributor's Job Title		
_	Economist			Senior Managing Direct		
10	Contributor's e Lehrer Finar	employer/law firm ncial		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor i	s a child, law firm of parent(s) (if	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	01/10/2024	Mahendru, Ashish  Contributor address; City;	State; Zip Code			\$5,000.00
		Houston, TX 77008				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			President		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Mahendru, F	PC		City of Houston		
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	01/03/2024	McFarland, Charles	_			\$1,000.00
		Contributor address; City;  Houston, TX 77002	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	•	
	Attorney			Condemnation Attorney	/	
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	McFarland F	PLLC				
	If contributor is	s a child, law firm of parent(s) (if	f any)			

	MONET	ARY POLITICAL CONTRIBU	JTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete	this	form.	1	Total pages Schedule A(J)1: Sch: 9/15 Rpt: 12/30
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Engelhart, M	like (The Honorable)			╙	00061342
4	Date	5 Full name of contributor out-of-state PA	C (ID#:	)	7	Amount of Contribution (\$)
	01/10/2024	Mukerji, Sam  6 Contributor address; City; State; Zip Code				\$1,500.00
		Gontilisator address, Gry, State, Zip Gode				
		Houston, TX 77024				
8	Contributor's I Attorney	Principal Occupation		9 Contributor's Job Title Partner		
10	Contributor's of Mukerji Law	employer/law firm Firm		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor i	s a child, law firm of parent(s) (if any)		1		
F	Date	Full name of contributor  out-of-state PA	C (ID#:	)	T	Amount of Contribution (\$)
	01/03/2024	Nech, Nichole				\$1,000.00
		Contributor address; City; State; Zip Code			1	
		Houston, TX 77007				
		Principal Occupation		Contributor's Job Title		
	Attorney			Founding Attorney		
		employer/law firm		Law firm of contributor's sp Law Offices of Alexand		
	Nech Law F			Law Offices of Alexand	erc	outevich
	ii contributor i	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-of-state PA	C (ID#:	)		Amount of Contribution (\$)
	01/18/2024	Norton Rose Fulbright US LLP Texas Cor				\$1,500.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77010		1		
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
_	If contributor i	s a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Fotal pages Schedule A(J)1: Sch: 10/15 Rpt: 13/30
2	FILER NAME Engelhart, M	like (The Honorable)			1	Filer ID (Ethics Commission Filers) 00061342
4	Date 01/02/2024	<ul><li>5 Full name of contributor</li><li>Ozlat, Shawn</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7 /	Amount of Contribution (\$) \$1,000.00
		Houston, TX 77056				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Founding Attorney		
10	Contributor's of Ozlat Injury	employer/law firm Lawyers		11 Law firm of contributor's sp	oouse	(if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	01/10/2024	Prather, Mike  Contributor address; City;	<u> </u>			\$1,000.00
		Houston, TX 77008				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Attorney			Partner		
		employer/law firm		Law firm of contributor's sp		
	Donato Brov			The Greenwood Prathe	r Lav	V FIRM
	If contributor is	s a child, law firm of parent(s) (i	fany)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	<i> </i>	Amount of Contribution (\$)
	01/04/2024	Sears II, Ross				\$1,000.00
		Contributor address; City; Hunt, TX 78024	State; Zip Code			
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Attorney			Partner		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse	(if any)
	Ross A. Sea	rs II, PC				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 11/15 Rpt: 14/30
2	FILER NAME Engelhart, M	like (The Honorable)			3	Filer ID (Ethics Commission Filers) 00061342
4	Date 01/22/2024	<ul><li>5 Full name of contributor Seerden, Andrew</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$) \$500.00
		Houston, TX 77009				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Founding Attorney		
10	<ul><li>10 Contributor's employer/law firm</li><li>Seerden Law Firm</li><li>11 Law firm of contributor's spo</li></ul>					se (if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)
	01/25/2024 Shipley, George  Contributor address; City; State; Zip Code					\$500.00
		Houston, TX 77002				
		Principal Occupation		Contributor's Job Title		
	Attorney			Partner		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
		Montgomery LLP	£ 0.00.0			
	ii contributor i	s a child, law firm of parent(s) (i	rany)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	01/12/2024	Sigman, Rene				\$500.00
Contributor address; City; State; Zip Code  Houston, TX 77055			•			
_	Contributor's F	I Principal Occupation		Contributor's Job Title		
	Attorney			Of Counsel		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Williams Har	t & Boundas, LLP				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 12/15 Rpt: 15/30
2	FILER NAME Engelhart, M	like (The Honorable)			3	Filer ID (Ethics Commission Filers) 00061342
4	Date 01/19/2024	<ul><li>5 Full name of contributor Strawn, John</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$1,000.00
	Houston, TX 77019					
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Managing Partner		
10	10 Contributor's employer/law firm Strawn Pickens LLP  11 Law firm of contributor's spo					se (if any)
12		s a child, law firm of parent(s) (i	family			
12	. II CONTINUATOR II	s a cilliu, iaw iiiiii oi pareiii(s) (i	iany)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	01/19/2024 Streich, Michael  Contributor address; City; State; Zip Code				\$500.00	
		Crosby, TX 77532				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Attorney			Trial Lawyer		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Zehl & Asso					
	If contributor is	s a child, law firm of parent(s) (i	f any)			
=	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	01/23/2024	Thomas, John	_			\$500.00
	Contributor address; City; State; Zip Code  Houston, TX 77002					
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Partner		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Hicks Thoma	as LLP				
	If contributor is	s a child, law firm of parent(s) (i	f any)	1		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1		
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 13/15 Rpt: 16/30		
2	FILER NAME Engelhart, M	like (The Honorable)			3 Filer ID (Ethics Commission Filers 00061342			
4	Date 01/11/2024	<ul><li>5 Full name of contributor Todd, Jeffrey</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$2,500.00		
		Houston, TX 77034						
8		Principal Occupation		9 Contributor's Job Title				
	Attorney			Founding Attorney				
10	10 Contributor's employer/law firm       11 Law firm of contributor's sport         The Todd Law Group       11 Law firm of contributor's sport					se (if any)		
12	! If contributor is	s a child, law firm of parent(s) (i	f any)	•				
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)		
	O1/25/2024 Totz, Alberta  Contributor address; City; State; Zip Code				\$500.00			
		Houston, TX 77005		T				
		Principal Occupation		Contributor's Job Title	: - 1:	-4		
	Therapist			Behavioral Health Spec				
		employer/law firm		Law firm of contributor's sp	oous	se (if any)		
	Self Employe		• · · ·					
	if contributor is	s a child, law firm of parent(s) (i	rany)					
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)		
	01/25/2024	Totz, Andrew	_			\$500.00		
Contributor address; City; State; Zip Code  Houston, TX 77098								
	Contributor's I	Principal Occupation		Contributor's Job Title				
	Attorney			Partner				
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)		
	Totz Ellison	& Totz, P.C.						
	If contributor is	s a child, law firm of parent(s) (i	f any)					

	MONET	ARY POLITICAL (	CONTRIBUTIO	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains how	v to complete this	form.	1	Total pages Schedule A(J)1: Sch: 14/15 Rpt: 17/30	
2	FILER NAME Engelhart, M	like (The Honorable)			3	Filer ID (Ethics Commissio 00061342	n Filers)
4	Date 01/17/2024	<ul><li>5 Full name of contributor White, Rene</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$100.00
		Houston, TX 77004					
8		Principal Occupation		9 Contributor's Job Title			
	Court Repor			President			
10	10 Contributor's employer/law firm       11 Law firm of contributor's spot         RM Reporting, Inc.       11 Law firm of contributor's spot					se (if any)	
12	If contributor is	s a child, law firm of parent(s) (if	any)	1			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/18/2024 Wizig, Scott  Contributor address; City; State; Zip Code						\$1,000.00
	O - stalle stands I	Houston, TX 77057		O antilla de ale Title			
	Realtor	Principal Occupation		Contributor's Job Title  Mortgage Broker			
		and a south as a firm				and (if a many)	
	SWE Homes	employer/law firm		Law firm of contributor's sp	Jou:	se (II ariy)	
_		s a child, law firm of parent(s) (if	anv)				
	ii contributor i	s a crima, law illim of parcrit(s) (il	arry)				
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Π	Amount of Contribution (\$)	
	01/18/2024	Wright Close & Barger, L	LP				\$1,000.00
Contributor address; City; State; Zip Code  Houston, TX 77056			•				
	Contributor's F	<u>I</u> Principal Occupation		Contributor's Job Title	<u> </u>		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)	
	If contributor is	s a child, law firm of parent(s) (if	any)	<u>I</u>			

MONE	TARY POLITICAL CONTRIBUTION	SCHEDULE A(J)1	
The Instru	uction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 15/15 Rpt: 18/30	
2 FILER NAME Engelhart, N	E Mike (The Honorable)		3 Filer ID (Ethics Commission Filers) 00061342
4 Date 01/18/2024	<ul> <li>Full name of contributor</li></ul>	7 Amount of Contribution (\$) \$1,000.00	
	Houston, TX 77002		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor	is a child, law firm of parent(s) (if any)	1	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenoider/Political Committee Legal Services Salanes/Wages/Contract Labor OTHER (enter a category not listed above)  Credit Card Payment  The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 1/6 Rpt: 19/30	Engelhart, Mike (The Honorable) 00061342					
4	Date	5 Payee name					
	01/04/2024	Anderson, Charoletta (Dr.)					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$1,500.00	333 Lake Street					
		Houston, TX 77098					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense  Church program					
		Charten program					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						
	Date	Payee name					
	01/03/2024	Berg Plummer Johnson & Raval LLP					
	Amount (\$)	Payee address; City; State; Zip Code					
\$10,000.00 3700 Buffalo Speedway							
	, -,	Suite 1150					
		Houston, TX 77098					
	PURPOSE						
	OF	(a) Category (See Categories listed at the top of this schedule)  Legal Services  (b) Description  Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITURE	Check if Austin, TX, officeholder living expense					
		Legal fees					
	0 1: 0:11:4:11						
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
	01/09/2024	Campaign Warriors					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$1,000.00	14237 East Sam Houston Parkway North					
		Suite 200					
		Houston, TX 77044					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense					
		Voter outreach					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/Ol	<del>1</del>					

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
<u> </u>	T.1 C.1.1 =:	T
1	Total pages Schedule F1:	
L	Sch: 2/6 Rpt: 20/30	Engelhart, Mike (The Honorable) 00061342
4	Date	5 Payee name
	01/22/2024	Campaign Warriors
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	14237 East Sam Houston Parkway North
		Suite 200
		Houston, TX 77044
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Voter outreach
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	01/24/2024	Chase Card Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$12,560.42	PO Box 6294
		Carol Stream, FL 60197
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Credit card payment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	01/08/2024	Chase Card Services
$\vdash$		
	Amount (\$) \$9,844.03	Payee address; City; State; Zip Code PO Box 6294
	ψ3,044.03	100000234
		Caral Stroom El 60107
	BURE 2 2 -	Carol Stream, FL 60197
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Credit Card Payment  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Credit card payment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/6 Rpt: 21/30	Engelhart, Mike (The Honorable) 00061342
4	Date	5 Payee name
	01/03/2024	Coastal Signs Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,200.00	7722 Thorncreek Way
		Houston, TX 77095
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Billboard signage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/24/2024	Coastal Signs Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$900.00	7722 Thorncreek Way
		Houston, TX 77095
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Billboard signage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/19/2024	Coastal Signs Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$900.00	7722 Thorncreek Way
		Houston, TX 77095
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Billboard signage
		Sinsourd Signage
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

## SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comple	te this form.			
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 4/6 Rpt: 22/30	Engelhart, Mike (The Honorable)	00061342			
4	Date	5 Payee name	•			
	01/03/2024	Frost Bank				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$30.00	P.O. Box 1315				
		Houston, TX 77251				
8	PURPOSE		Description			
	OF	Fees	Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE		Check if Austin, TX, officeholder living expense			
			Bank wire fee			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held			
	experientare to benefit Grot	'				
	Date	Payee name				
	01/18/2024	Grant Martin Campaigns				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$14,558.14	2383 Bush Street				
		San Francisci, TX 94115				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description			
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.			
	LXI LINDITORE		Check if Austin, TX, officeholder living expense			
			Collateral printing, digital ads & consulting fee			
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/OI	•	Office field			
	D-4-					
	Date	Payee name				
	01/04/2024	Grant Martin Campaigns				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$16,650.20	2383 Bush Street				
		San Francisci, TX 94115				
	PURPOSE OF	,	Description			
	EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
			Collateral printing, digital ads & consulting fee			
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/OI					
l						

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/6 Rpt: 23/30	Engelhart, Mike (The Honorable) 00061342
4	Date	5 Payee name
	01/12/2024	Jewish Herald Voice (JHV)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$460.00	PO Box 153
		Houston, TX 77001
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Print ad
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	d
F	Date	Payee name
	01/02/2024	Rally Piryx LLC
H	Amount (\$)	Payee address; City; State; Zip Code
	\$1,430.20	995 Market Street
		San Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Online donation fees
		Chimic donation rees
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	01/12/2024	Strong Strategies LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,518.48	PO Box 56386
		Houston, TX 77256
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	LXI ENDITORE	Check if Austin, TX, officeholder living expense
		Fundraising & compliance services
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor,

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/6 Rpt: 24/30	Engelhart, Mike (The Honorable) 00061342
4	Date	5 Payee name
	01/22/2024	Strong Strategies LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	PO Box 56386
		Houston, TX 77256
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Fundraising & compliance services
		r unuruising & compliance services
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/19/2024	Texas Victory Consulting
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,834.50	1034 Sauliner Street
		Houston, TX 77019
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Sign program
		Olgh program
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.								
1	1 Total pages Schedule F4: 2 FILER NAME					3 Filer ID (Ethi	3 Filer ID (Ethics Commission Filers)		
	Sch: 1/5 Rpt: 25/30	Engelhart, Mike (Th	ne Honorable)	00061342					
4	CREDIT CARD ISSUER		ncial institution ase	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	170.0	00	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	) Credit Card Issuer	Paid			
		\$100.00	01/04/2024						
7	PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code	
		Harris County Dem	ocratic	#100	en Parkway , TX 77019				
8	PURPOSE OF	(a) Category		(b) Descrip	otion				
	EXPENDITURE	(See Categories listed at the top		Event tic	ket				
	X Political	Contributions/Donatio							
	Non-Political		of Texas. Complete Schedule T.	l .	Check if Austin, TX,	officeholder living exp	ense		
9	Complete ONLY if direct	Candidate/Officeholder		e sought		Office held			
е	expenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	) Credit Card Issuer	Paid			
		\$43.77	01/25/2024						
	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code	
		Christys Donuts		1103 We	st Gray Street				
				Houston,	TX 77019				
	PURPOSE OF	(a) Category	<b>7</b> 11. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(b) Descrip					
	EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Jury refre	eshments				
	X Political								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	) Credit Card Issuer	Paid			
		\$21.58	01/23/2024						
	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code	
		Christys Donuts		1103 We	st Gray Street				
				Houston	TV 77010				
⊢	PURPOSE OF	(a) Category		(b) Descrip	TX 77019				
	EXPENDITURE	(See Categories listed at the top			eshments				
	X Political	Food/Beverage Expe	nse						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	Check if Austin. TX	officeholder living exp	ense		
$\vdash$	Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought		Office held			
е	expenditure to benefit C/OH			J					
Г		1							

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete th	is form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)		
Sch: 2/5 Rpt: 26/30	Engelhart, Mike (Th			00061342				
4 CREDIT CARD ISSUER	Name of fina see p	EXPEND	F UNITEMIZED ITURES ED TO A CREDIT	\$ 170.00				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer		r Paid			
	\$30.48	01/24/2024						
7 PAYEE	(a) Payee name	(b) Payee a	ddress;	City,	State,	Zip Code		
	The Hot Bagel Shop		2015 S. SI	nepherd Drive				
		Houston, TX 77019						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti					
X Political	Food/Beverage Expe	*	Jury refres	nments				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
9 Complete ONLY if direct	Candidate/Officeholder	r name Offic	e sought		Office held			
expenditure to benefit C/OH		-						
PAYMENT	(a) Amount Charged	(b) Date of Charge	. , ,	Credit Card Issue	r Paid			
	\$12,562.42	01/22/2024	01/24/202	4				
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code	
	Porg Dlummor Joh	ncon ( Doval	3700 Buffalo Speedway					
	Berg Plummer Johnson & Raval			Suite 1150				
				TX 77098				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti					
X Political	Legal Services	,	Legal fees					
Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			Check if Austin, TX.	officeholder living exp	ense		
Complete ONLY if direct								
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (	Credit Card Issuer	r Paid			
	\$10.78	01/14/2024						
PAYEE	(a) Payee name		(b) Payee address; City, State, Zip			Zip Code		
	Lowe's Home Centers 4645 Beechnut Street		hnut Street					
	Lowe 3 Home Cent	CIS						
	(a) Cottonomi		Houston, 7					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Descripti					
	Office Overhead/Rental Expense  Sign supplies			ies				
I 🗏	X   Political							
					officeholder living exp	ense		
Complete ONLY if direct candidate/Officeholder name office sought expenditure to benefit C/OH					Office held			
SAPERIALIZATE TO DELICITE O/OTT	<u> </u>							

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
Sch: 3/5 Rpt: 27/30	Engelhart, Mike (The Honorable)				00061342			
4 CREDIT CARD ISSUER	Name of final see p	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
	\$30.20	01/12/2024						
7 PAYEE	(a) Payee name  Brothers Taco House		(b) Payee a	address; ancipation Avenu	City,	State,	Zip Code	
			1004 Emanoipation / Worldo					
			Houston, TX 77003					
8 PURPOSE OF	(a) Category		(b) Descrip					
EXPENDITURE  X Political	(See Categories listed at the top Food/Beverage Expe	· · · · · · · · · · · · · · · · · · ·	Jury refre	shments				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	Chack if Austin TY	C, officeholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder		e sought	Official if August, 174,	Office held	Дрепос		
expenditure to benefit C/OH			· ·					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
	\$32.49	01/24/2024						
PAYEE	(a) Payee name	l	(b) Payee	address;	City,	State,	Zip Code	
	Luby's		201 Caro	line Street				
				TX 77002				
PURPOSE OF	(a) Category	of this schodule)	(b) Descrip					
EXPENDITURE  X Political	(See Categories listed at the top Food/Beverage Expe		Jury refre	shments				
Non-Political	(C) Check if travel outside of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living e	xpense		
Complete ONLY if direct					Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
	\$29.10	01/20/2024						
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code	
	Taga Cahana		167 Yale	St.				
Taco Cabana								
DUDDOOF OF	(a) Cotogon		Houston, (b) Descrip	TX 77007				
EXPENDITURE	JRPOSE OF (a) Category (PENDITURE (See Categories listed at the top of this schedule)		Jury refre					
X Political	Food/Beverage Expe							
Non-Political	(c) Check if travel outside	of Texas, Complete Schedule T	<u> </u>	Check if Austin, TX,	officeholder living e	xnense		
Complete ONLY if direct	(c)				Office held	лрепос		
expenditure to benefit C/OH			J					
	ı							

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)					
Sch: 4/5 Rpt: 28/30	Engelhart, Mike (The Honorable)				00061342				
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED ITURES ED TO A CREDIT	\$	170.00			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (	Credit Card Issuer	r Paid				
	\$1,000.00	01/20/2024							
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code		
	Flora		3422 Allen	·					
	( ) 0 :		Houston, 7						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti Event venu						
X Political	Event Expense	,	Event vent	ue deposit					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	, officeholder living expense				
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (	Credit Card Issue	r Paid				
	\$32.53	01/19/2024							
PAYEE (a) Payee name			(b) Payee a	ddress;	City,	State,	Zip Code		
	Brothers Taco House 1604 Emancipation Avenu			ıe					
			Houston, 7						
PURPOSE OF	(a) Category (See Categories listed at the top	of this schodule)	(b) Descripti						
EXPENDITURE  X Political	Food/Beverage Expe		Jury refres	shments					
Non-Political	(C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX,			, officeholder living expense					
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 0	Credit Card Issuer	r Paid				
	\$130.27	01/14/2024							
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code		
	E It I		1601 S. California Avenue		)				
	Facebook								
				Palo Alto, CA 94304					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Descripti						
l <u> </u>	Advertising Expense	Digital ads	;						
X Political									
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense								
Complete ONLY if direct									
expenditure to benefit C/OH			experioritire to beriefit C/On						

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	Commiss	ion Filers)			
	Sch: 5/5 Rpt: 29/30	Engelhart, Mike (Th	ne Honorable)		00061342					
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 170.00					
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid					
		\$9.00	01/12/2024							
7	PAYEE	(a) Payee name (b) Payee address; Linktree 37 Islington Street			City,	State,	Zip Code			
L				Collingwood Victoria 3066 Australia						
8	PURPOSE OF	(a) Category	-# Al-i	(b) Description						
	EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Social media managemen	it tool					
	X Political		<u>_</u> /,poee							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expen	se				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held					
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	<sup>-</sup> Paid					
		\$25.00	01/04/2024							
	PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code			
	Bellaire Business Alliance			5158 Spruce						
				Bellaire, TX 77401						
r	PURPOSE OF	(a) Category		(b) Description						
	EXPENDITURE	(See Categories listed at the top		Event ticket						
	X Political	Contributions/Donatio Candidate/Officeholde	er/Political Committee							
	Non-Political	<del></del>	of Texas. Complete Schedule T.	Check if Austin, TX.	officeholder living expen	se				
H	Complete ONLY if direct	Candidate/Officeholder	·	e sought	Office held					
١,	expenditure to benefit C/OH			9						

## INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 30/30 2 FILER NAME Filer ID (Ethics Commission Filers) Engelhart, Mike (The Honorable) 00061342 Date 8 Amount (\$) 5 Name of person from whom amount is received 01/16/2024 Engelhart, Mike \$750.00 6 Address of person from whom amount is received; City; State; Zip Code Houston, TX 77256 Purpose for which amount is received ☐ Check if political contribution returned to filer Refund to campaign of overage donated to HBAD Name of person from whom amount is received Amount (\$) Date 01/17/2024 Frost Bank \$6.94 Address of person from whom amount is received; City; State; Zip Code Bellaire, TX 77401 Purpose for which amount is received Check if political contribution returned to filer Interest Date Name of person from whom amount is received Amount (\$) 01/12/2024 Frost Bank \$2,376.99 Address of person from whom amount is received; City; State; Zip Code Bellaire, TX 77401 Purpose for which amount is received Check if political contribution returned to filer Interest on CD