JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to c	omplete this form.	1	Filer ID (Ethics Commission F 00084317	-ilers)	2 Total pages	filed: 23
3 CANDIDATE /	MS / MRS / MR	FIRST			MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	The Honorable	Brittanye L.					
		-				Date Received	
						ELECTRONIC	ALLY FILED
	NICKNAME	LAST			SUFFIX	02/05/2024	
		Morris					
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX;	APT / SUITE #; CI	TY;		ZIP CODE	Date Hand-delivered	or Date Postmarked
MAILING ADDRESS			00			Receipt #	Amount
	REDACTED PER	254.0313, GOV I	CO	JE			
Change of Address						Date Processed	
						Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST				MI	
TREASURER NAME	Mr.	Adolf R.					
	NICKNAME	LAST				SUFFIX	
	NICKNAWE	Morris				JUFFIX	
		Morris					
6 CAMPAIGN TREASURER	STREET ADDRESS (NC	PO BOX PLEASE);		APT / SI	JITE #; CITY	; ST	ATE; ZIP CODE
ADDRESS			0				
(Residence or Business)	REDACTED PER	254.0313, GOV I	CO	DE			
7 CAMPAIGN	AREA CODE P	HONE NUMBER	EXT	ENSION			
TREASURER PHONE	(713) 569-6966						
PHONE							
8 REPORT							
TYPE	January 15	X 30th day befo	re ele	ction Rund	off		ampaign treasurer
	1 10k/15	8th day before			eded modified	appointment (of Final Report (At	
	July 15		elec		rting limit	Final Report (At	lach C/OH-FR)
9 PERIOD COVERED	· · · ·	ear _			Month Day	Year	
COVERED	01/01/2024	Т	HRC	DUGH	01/31/202	24	
10 ELECTION	ELECTION DAT	- 1					
IU ELECTION			Prim		LECTION TYPE	Other	
	03/05/2024				_		
	00,00,2021		Gene	eral	Special		
11 OFFICE	OFFICE HELD (if any)			12	OFFICE SOUGH	T (if known)	
	District Judge District	333 Harris			District Judge D	District 333	
	<u>I</u>			I			
		GO	то	PAGE 2			
Forms provided by Te	xas Ethics Commission	WWW.6	ethic	s.state.tx.us		Vers	sion V3.5.1.9000c47f

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 23

I

13 C / OH NAME	Morris, Brittanye L. (The Honorable)		14 Filer ID 00084317	(Ethics Con	nmission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accep These expenditures may h d officeholders are required	ave been made without	the candidate's or off	ïceholder's kr	nowledge or		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME						
	GENERAL	RAL						
		COMMITTEE ADDRESS						
	SPECIFIC							
		COMMITTEE CAMPAIGN	TREASURER ADDRES	SS				
TOTALS	16 CONTRIBUTION TOTALS 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)							
				S)	\$	5,840.00		
EXPENDITURE						0.00		
TOTALS	4. TOTAL POLIT	ICAL EXPENDITURES		\$	26,583.11			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PI	AL CONTRIBUTIONS MAI	NTAINED AS OF THE L	AST DAY OF THE	\$	43,196.89		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCI OF THE REPOR	PAL AMOUNT OF ALL OUT	STANDING LOANS AS	OF THE LAST DAY	\$	0.00		
17 AFFIDAVIT								
		true an	, or affirm, under penalt d correct and includes a Fitle 15, Election Code.	y of perjury, that the a Il information required	accompanying d to be report	g report is ed by me		
			The Honor	able Brittanye L. M	Iorris			
			Signature of	f Candidate or Officeh	nolder			
AFFIX NO	TARY STAMP / SEAL AB	OVE						
		aid		, this the		day		
of	of, 20, to certify which, witness my hand and seal of office.							
Signature of offi	cer administering oath	Printed name of office	er administering oath	Title of offic	cer administe	ring oath		
Forms provided by Te	xas Ethics Commission	n www.ethics.	state.tx.us		Version \	/3.5.1.9000c47		

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

3 of 23

18 FILER NAM	(Ethics Commission Filers)						
Morris, Brit	00084317						
	20 SCHEDULE SUBTOTALS NAME OF SCHEDULE						
1. X	1. X SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)						
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$				
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$				
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$				
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	5	\$ 26,583.11				
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$				
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$				
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$				
9.	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 CONTRIBUTION	DNS	\$				
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$				

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 1/2 Rpt: 4/23			
2 FILER NAME Morris, Britta	nye L. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084317				
4 Date 01/29/2024	5 Full name of contributor out-of-state PAC (ID#:_ ALI, NAUREEN		7 Amount of Contribution (\$) \$40.00			
	6 Contributor address; City; State; Zip Code HOUSTON, TX 77096					
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	I			
RETIRED		RETIRED				
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	ouse (if any)			
N/A						
12 If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)			
01/08/2024	BARTHOLET, DOMINIQUE		\$350.00			
	Contributor address; City; State; Zip Code					
	HOUSTON, TX 77219					
	Principal Occupation	Contributor's Job Title				
MEDIATOR		MEDIATOR				
	mployer/law firm	Law firm of contributor's sp	oouse (if any)			
	T MEDIATIONS PC					
If contributor is	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)			
01/22/2024	CHIROMAX WELLNESS CENTER INC		\$450.00			
	Contributor address; City; State; Zip Code					
	HOUSTON, TX 77022					
Contributor's F	Principal Occupation	Contributor's Job Title	I			
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)			
If contributor is	s a child, law firm of parent(s) (if any)					

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

т	he Instru	ction Guide explains ho	1 Total pages Schedule A(J)1: Sch: 2/2 Rpt: 5/23		
2 F	ILER NAME		3 Filer ID (Ethics Commission Filers)		
N	lorris, Britta	anye L. (The Honorable)			00084317
4 D	ate	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	1/16/2024	hadi, husein			\$5,000.00
		6 Contributor address; City; S	State [.] Zin Code		
		houston, TX 77036			
		Principal Occupation		9 Contributor's Job Title	
	ttorney			ATTORNEY	
		employer/law firm		11 Law firm of contributor's sp	oouse (if any)
н	iadi law f	IRM			
12 If	contributor i	is a child, law firm of parent(s) (if	any)		

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/18 Rpt: 6/23	Morris, Brittanye L. (The Honorable) 00084317
4 Date	
01/29/2024	5 Payee name 12 OAKS PARKING
6 Amount (\$) \$13.00	7 Payee address; City; State; Zip Code 970 CANTON ST STE B ROSWELL, GA 30075
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PARKING
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H
Date	Payee name
01/29/2024	ADOBE ACROBAT
Amount (\$) \$32.46	Payee address; City; State; Zip Code 344 PARK AVENUE SAN JOSE, CA 95110
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense MONTHLY SUBSCRIPTION FEE
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H
Date 01/23/2024	Payee name ALIEXPRESS
Amount (\$) \$161.62	Payee address; City; State; Zip Code 969 WEST WEN YI RD
	YU HANG DISTRICT ZHEJIANG PROVINCE HANGZHOU 31121 China
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense EVENT DECORATIONS
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			EXPENDITURE CATEG Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Loan Rep Office Ov Polling Ex Printing E Salaries/V	ayme erhea kpense xpens Xpens Wages	nt/Reimbursement d/Rental Expense e se s/Contract Labor		Transportation E Travel in District Travel Out of Di	
1	Total pages Schedule F1:	2					3	Filer ID	(Ethics Commission Filers)
T	Sch: 2/18 Rpt: 7/23		Morris, Brittanye L. (The Honorable)				3	00084317	
4	Date	5	Payee name						
	01/23/2024		AREA 5 DEMOCRATS						
6	Amount (\$)	7	Payee address; City; Sta	te; Zip Co	ode				
	\$20.00		3800 SPENCER HWY						
			STE L						
			PASADENA, TX 77504						
8	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description			
	OF		Fees	,		Check if travel	outsi	ide of Texas. Com	nplete Schedule T.
	EXPENDITURE					Check if Austin	, TX	, officeholder living	g expense
						MEMBERSH	IP	FEES	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	l Ight			Office h	eld
	Date		Payee name						
	01/17/2024		ASSOCIATION OF WOMEN ATTOR	NEYS					
	Amount (¢)	-	Davias address: Citur Sta	to: Zin Cr	odo				
	Amount (\$)			te; Zip Co	Jue				
	\$35.00		2450 LOUISIANA ST						
			STE 400-301						
			HOUSTON, TX 77006						
	PURPOSE	(2)			(h)	Description			
	OF	(")	Category (See Categories listed at the top of this s	schedule)	(0)		outsi	ide of Texas. Com	nplete Schedule T.
	EXPENDITURE		Fees					, officeholder living	
						MEMBERSH			0 - F
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ight			Office h	eid
	experiatore to benefit 0/01								
	Date		Payee name						
	01/22/2024		ASSOCIATION OF WOMEN ATTOR	NEYS					
-	Amount (\$)	⊢		te; Zip Co	nde				
	.,			ie, zip ci	Jue				
	\$30.75		2450 LOUISIANA ST						
			STE 400-301						
			HOUSTON, TX 77006						
-	PURPOSE				(h)	Description			
	OF	^(a)	Category (See Categories listed at the top of this s	schedule)	(0)	Description	outo	ido of Toyoo Com	nplete Schedule T.
	EXPENDITURE		Event Expense					, officeholder living	
						EVENT TICK			у слренас
							<u>ا ت</u>		
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	lght			Office h	eld
	expenditure to benefit C/OI	Н							

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	PILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 3/18 Rpt: 8/23	Morris, Brittanye L. (The Honorable)	00084317			
4	Date 01/16/2024	Payee name Amegy Bank				
6	Amount (\$) \$6.17	Payee address; City; State; Zip Code 17046 Stubner Airline spring, TX 77379				
8	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense ANSACTION FEE			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	01/25/2024	Amegy Bank				
	Amount (\$) \$2.10	Payee address; City; State; Zip Code 17046 Stubner Airline spring, TX 77379				
	PURPOSE OF EXPENDITURE	a) Category (See Categories listed at the top of this schedule) (b) Description Fees Check if travel o Check if travel o Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense ANSACTION FEE			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	01/29/2024	Amegy Bank				
	Amount (\$) \$20.81	Payee address; City; State; Zip Code 17046 Stubner Airline				
		spring, TX 77379				
	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense ANSACTION FEE			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 4/18 Rpt: 9/23	Morris, Brittanye L. (The Honorable)	00084317			
4	Date 01/31/2024	5 Payee name Amegy Bank				
6	Amount (\$) \$2.50	7 Payee address; City; State; Zip Code 17046 Stubner Airline spring, TX 77379				
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense E			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	01/16/2024	BATTEAU, J. BRAD				
	Amount (\$) \$325.00	Payee address; City; State; Zip Code 3408 DELANO ST				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense NGING			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	01/04/2024	BRYANT, PHILIP				
	Amount (\$) \$1,925.00	Payee address; City; State; Zip Code 1918 FREEMAN ST				
		houston, TX 77009				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense T FEE			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment							
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
Sch: 5/18 Rpt: 10/23	Morris, Brittanye L. (The Honorable)						
4 Date	5 Payee name						
01/04/2024	CALLTURE COMMUNICATIONS						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$7.63	2800 SKYMARK AVE						
	STE 403						
	MISSISSAUGA ONTARIO L4W5A6 Canada						
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF	Fees Check if travel outside of Texas. Complete Schedule T.						
EXPENDITURE	Check if Austin, TX, officeholder living expense						
	FEE						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	I Candidate/Officeholder name Office sought Office held H						
Date	Payee name						
01/30/2024	CG STUDIO						
Amount (\$)	Payee address; City; State; Zip Code						
\$4,350.00	14212 BENSON						
	OVERLAND PARK , KS 66221						
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 						
	VIDEO MEDIA						
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H						
Date	Payee name						
01/30/2024	DIRECTV						
Amount (\$)	Payee address; City; State; Zip Code						
.,							
\$119.58	PO BOX 105503						
	ATLANTA, GA 30348						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF	Office Overhead/Rental Expense						
EXPENDITURE							
	OFFICE TV						
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	rhead/R pense pense ages/C	Reimbursement Rental Expense ontract Labor e this form.		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 6/18 Rpt: 11/23		Morris, Brittanye L. (The Honorable)					00084317	
4	Date	5	Payee name						
	01/23/2024		DRI, INC.						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de				
	\$5,000.00		2414 MIMOSA LANE						
			#1						
			HOUSTON, TX 77019						
8	PURPOSE	(a)	Category (See Categories listed at the top of this scho	edule)	(b) D	escription			
	OF EXPENDITURE		Advertising Expense	,	Ľ	Check if travel o	outsi	de of Texas. Com	plete Schedule T.
	EXPENDITORE				Ē	_		officeholder living	expense
					В	BANNER GR	AP	HICS	
_									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Office sou	ght			Office he	ald
	Date		Payee name						
	01/03/2024		Door Dash						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$9.99								
			#600						
			San Francisco, TX 94103						
	PURPOSE	(a)			(h) p	accription			
	OF	(a)	Category (See Categories listed at the top of this sche Fees	edule)	(0) D F	escription Check if travel o	outsio	de of Texas. Com	plete Schedule T.
	EXPENDITURE				Ē	Check if Austin,	ΤX,	officeholder living	expense
					C	ELIVERY F	EE		
	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	ght			Office he	eld
	expenditure to benefit C/OI	Π							
	Date		Payee name						
	01/29/2024		FIREDUP 559						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$250.00		2277 WINROCK BLVD						
			322						
			HOUSTON, TX 77057						
_	PURPOSE	(a)	Category (See Categories listed at the top of this sche	odulo)	(b) D	escription			
	OF		Event Expense	euule)	Γ		outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE				Ē	Check if Austin,	ΤX,	officeholder living	expense
					E	VENT			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Office sou	ght			Office he	eld

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reinbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 7/18 Rpt: 12/23	Morris, Brittanye L. (The Honorable)	00084317			
4	Date 01/10/2024	Payee name Fiverr				
6	Amount (\$) \$179.94	Payee address;City;State;Zip Code401 BroadwaySTE 1600New York, NY 10013-3020				
8	PURPOSE OF EXPENDITURE	OF Advertising Expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	01/16/2024	Fiverr				
	Amount (\$) \$205.73	Payee address;City;State;Zip Code401 BroadwaySTE 1600New York, NY 10013-3020				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense MEDIA			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	01/25/2024	Fiverr				
	Amount (\$) \$70.14	Payee address; City; State; Zip Code 401 Broadway STE 1600 New York, NY 10013-3020				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense SIGN			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Office Overhead/Rental Expense Git/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 8/18 Rpt: 13/23	Morris, Brittanye L. (The Honorable)	00084317				
4	Date 01/29/2024	Payee name Fiverr					
6	Amount (\$) \$693.85	Payee address; City; State; Zip Code 401 Broadway STE 1600 New York, NY 10013-3020 Image: Content of the second s					
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense EDIA				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	01/16/2024	GOURMANDIZE					
	Amount (\$) \$194.85	Payee address; City; State; Zip Code 2829 CHIMNEY ROCK HOUSTON, TX 77056					
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) (b) Description	outside of Texas. Complete Schedule T. , TX, officeholder living expense D				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	01/10/2024	Go Daddy.com					
	Amount (\$) \$242.79	Payee address;City;State;ZipCode2155 e godaddy way					
		tempe, AZ 85284					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Over Food/Beverage Expense Polling Exp Gift/Awards/Memorials Expense Printing Exp	ense ges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	·	3 Filer ID (Ethics Commission Filers)			
-	Sch: 9/18 Rpt: 14/23	orris, Brittanye L. (The Honorable)		00084317			
4	Date	ayee name					
	01/16/2024	o Daddy.com					
6	Amount (\$) \$2.80	ayee address; City; State; Zip Coc .55 e godaddy way	e				
		mpe, AZ 85284					
8	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedule)		utside of Texas. Complete Schedule T. TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	didate/Officeholder name Office soug	ht	Office held			
	Date	ayee name					
	01/11/2024	o Daddy.com					
	Amount (\$)	ayee address; City; State; Zip Coc	e				
	\$35.16	.55 e godaddy way mpe, AZ 85284					
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedule) dvertising Expense		utside of Texas. Complete Schedule T. TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	didate/Officeholder name Office soug	ht	Office held			
	Date	ayee name					
	01/22/2024	ARRIS COUNTY YOUNG DEMOCRATS					
	Amount (\$) \$55.00	ayee address; City; State; Zip Coc D BOX 131672	e				
		OUSTON, TX 77219					
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedule)		utside of Texas. Complete Schedule T. TX, officeholder living expense P FEES			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	didate/Officeholder name Office soug	ht	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explai	Office Ov Polling Ex Printing E Salaries/V	Expense Wages/Contract Labor	se	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)	
	Sch: 10/18 Rpt: 15/23		Morris, Brittanye L. (The Honorable)				00084317	
4	Date 01/19/2024		Payee name Houston Lawyers Association					
6	Amount (\$)		-	ate; Zip Co	ode			
U	\$83.00		po box 300009	αι ε , Σιρ Οι	ue			
			houston, TX 77230					
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this Fees	schedule)		avel outs .ustin, TX	ide of Texas. Complete Schedule T. c, officeholder living expense FEES	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	Office sou	ught		Office held	
	Date		Payee name					
	01/26/2024		Kingdom Builders CATHEDRAL					
	Amount (\$)		Payee address; City; Sta	ate; Zip Co	ode			
	\$250.00		6011 W OREM DR HOUSTON, TX 77085					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this Event Expense	schedule)		avel outs	ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ught		Office held	
	Date		Payee name					
	01/29/2024		LITTLE NEW ORLEANS					
	Amount (\$) \$80.01		Payee address; City; Sta 1001 TEXAS STE 150 HOUSTON, TX 77002	ate; Zip Co	ode			
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this Food/Beverage Expense	schedule)		avel outs .ustin, TX	ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office sou	ught		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Ex Printing Ex Salaries/W	kpense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 11/18 Rpt: 16/23	[Morris, Brittanye L. (The Honorable)			-	00084317
4	Date	5	Payee name				
	01/19/2024		M3 GRAPHICS				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de		
	\$4,000.00		11730 WILCREST DR				
			HOUSTON, TX 77099				
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Advertising Expense				ide of Texas. Complete Schedule T.
	-						, officeholder living expense
					GRAFHIC DE	_31	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held
	Date		Payee name				
	01/26/2024		M3 GRAPHICS				
	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$843.11		11730 WILCREST DR				
			HOUSTON, TX 77099				
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Advertising Expense				ide of Texas. Complete Schedule T.
							, officeholder living expense
					TARDOIGNE	, ,	
	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	aht		Office held
	expenditure to benefit C/OI				3		
-	Date		Payee name				
	01/12/2024		MALDONADO CONSULTING				
_	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$40.00		6814 EVANS ST				
			HOUSTON, TX 77061				
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Consulting Expense				ide of Texas. Complete Schedule T.
						, TX,	, officeholder living expense
					GOTV		
_)#i=-	~ la t		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	gnt		Office held
	expenditure to benefit C/OF	H					

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 12/18 Rpt: 17/23	Morris, Brittanye L. (The Honorable)	00084317				
4	Date 01/19/2024	Payee name MALDONADO CONSULTING					
6	Amount (\$) \$50.00	Payee address; City; State; Zip Code 6814 EVANS ST HOUSTON, TX 77061					
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	01/22/2024	MALDONADO CONSULTING					
	Amount (\$) \$60.00	Payee address; City; State; Zip Code 6814 EVANS ST					
	PURPOSE	HOUSTON, TX 77061					
	OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	01/29/2024	MALDONADO CONSULTING					
	Amount (\$) \$40.00	Payee address; City; State; Zip Code 6814 EVANS ST					
		HOUSTON, TX 77061					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 13/18 Rpt: 18/23	Morris, Brittanye L. (The Honorable)	00084317				
4	Date 01/31/2024	Payee name MARTIN LUTHER KING JR PARADE FOUNDATION					
6	Amount (\$) \$100.00	Payee address; City; State; Zip Code 400 NORTH SAM HOUSTON PKWY EAST STE 210 HOUSTON, TX 77060					
8	PURPOSE OF EXPENDITURE		butside of Texas. Complete Schedule T. , TX, officeholder living expense E				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	01/12/2024	Maxum Digital Media					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$1,000.00	6650 s texas 6 houston, TX 77083					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	01/19/2024	PATRIOT GROUP STRATEGIES					
	Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 11115 SAGEVALLEY DR					
		HOUSTON, TX 77089					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense G				
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing E Salaries/V	erhead pense xpens Vages	e /Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 14/18 Rpt: 19/23		Morris, Brittanye L. (The Honorable)					00084317
4	Date 01/23/2024	5	Payee name PATRIOT GROUP STRATEGIES					
_		<u> </u>		. 7:0 00				
0	Amount (\$)	ľ	Payee address; City; State 11115 SAGEVALLEY DR	; Zip Co	ue			
	\$1,000.00		11115 SAGEVALLET DR					
			LIQUETON TY 77000					
_			HOUSTON, TX 77089					
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description		ide of Taura Consults Calendaria T
	EXPENDITURE		Consulting Expense					ide of Texas. Complete Schedule T. , officeholder living expense
						CONSULTIN		,
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ight			Office held
_	Data	_						
	Date		Payee name					
	01/29/2024		ROLLIS FONTENOT INC					
	Amount (\$)		Payee address; City; State	; Zip Co	ode			
	\$475.00		18906 GIARA PONY TRL					
			TOMBALL, TX 77377					
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description		
	OF EXPENDITURE		Advertising Expense	,		Check if travel	outsi	ide of Texas. Complete Schedule T.
	EXPENDITORE						, TX,	, officeholder living expense
						VIDEO		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held
-	Date		Payee name					
	01/29/2024		RYZE COFFEE					
	Amount (\$)		Payee address; City; State	; Zip Co	ode			
	\$190.40		867 BOYLSTON ST	, <u>Lip</u> 00				
	\$100.40		5TH FLOOR #1863					
			BOSTON, MA 02116		-			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description		
	EXPENDITURE		Food/Beverage Expense					ide of Texas. Complete Schedule T. , officeholder living expense
						OFFICE COF		
							_	
-	Complete ONLY if direct	<u>_</u>	Candidate/Officeholder name	Office sou	l aht			Office held
	expenditure to benefit C/Oł			50 50u				

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Poling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 15/18 Rpt: 20/23	Morris, Brittanye L. (The Honorable)	00084317					
4	Date 01/16/2024	Payee name Ray & Wood						
6	Amount (\$) \$900.00	Payee address; City; State; Zip Code 300 Beardsley Ln. ste B-100 Austin, TX 78746						
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	01/23/2024	THE BAKER'S SON						
	Amount (\$) \$27.59	Payee address; City; State; Zip Code 8025 MAIN ST STE A HOUSTON, TX 77025						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense \KFAST					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	01/12/2024	UBER						
	Amount (\$) \$22.96	Payee address; City; State; Zip Code 405 HOWARD						
		SAN FRANCISCO, CA 94105						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ATION					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Offit/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAME	Filer ID (Ethics Commission Filers)			
	Sch: 16/18 Rpt: 21/23	Morris, Brittanye L. (The Honorable)	00084317			
4	Date 01/16/2024	5 Payee name UBER				
6	Amount (\$) \$158.08	7 Payee address; City; State; Zip Code 405 HOWARD SAN FRANCISCO, CA 94105				
8	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	01/29/2024	UBER				
	Amount (\$) \$17.70	Payee address; City; State; Zip Code 405 HOWARD				
		SAN FRANCISCO, CA 94105				
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	01/22/2024	amazon				
	Amount (\$) \$31.17	Payee address; City; State; Zip Code 10550 Ella blvd				
		houston, TX 77038				
	PURPOSE OF EXPENDITURE		iside of Texas. Complete Schedule T. X, officeholder living expense LIES			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Office Dverhead/Rental Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 17/18 Rpt: 22/23	Morris, Brittanye L. (The Honorable)	00084317				
4	Date 01/29/2024	Payee name amazon					
6	Amount (\$) \$64.97	Payee address; City; State; Zip Code 10550 Ella blvd houston, TX 77038					
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense PPLIES				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	01/08/2024	paypal					
	Amount (\$) \$10.61	Payee address;City;State;Zip Code2211 North First Street					
		San Jose, CA 95131					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense IG FEE				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	01/16/2024	paypal					
	Amount (\$) \$144.99	Payee address;City;State;Zip Code2211 North First Street					
		San Jose, CA 95131					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense IG FEE				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		EXPENDITURE CATEGO Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services The Instruction Guide explains	Loan Repayment/Rei Office Overhead/Ren Polling Expense Printing Expense Salaries/Wages/Cont	imbursement tal Expense tract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Travel in District Travel Out of District OTHER (enter a category not listed	
	Total pages Schedule F1:			•		Filer ID (Ethics Commis	cion Filore)
ľ	Sch: 18/18 Rpt: 23/23		= anye L. (The Honorable)			Filer ID (Ethics Commis 00084317	SSION FILETS)
4	Date 01/29/2024	5 Payee name paypal			I		
6	Amount (\$) \$1.65		First Street	; Zip Code			
		San Jose,	CA 95131				
8	PURPOSE OF EXPENDITURE	(a) Category _{(S} Fees	ee Categories listed at the top of this sch			le of Texas. Complete Schedule T. officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		iceholder name	Office sought		Office held	