CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM JCOR-C/OH

1	Filer ID (Eth	ics Commission Filers)	2 Total pages filed:				OFFICE U	SE ONLY
L	00084338		16				Date Received	
3	CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Cheryl			MI	ELECTRONICAI 02/06/2024	LY FILED
		NICKNAME	LAST			SUFFIX		
			Elliott Thornton				Date Hand-delivered or D	Date Postmarked
4	ORIGINAL REPORT TYPE	January 15 July 15	Runoff	reporting limit	Other (sp	ecify)	Receipt #	Amount
		\mathbf{X} 30th day before election	15th day after camp					
		8th day before election	Final Report (Attack	• •			Date Processed	
5	ORIGINAL PERIOD	Month Day Year		Month I	Day	Year	Date Imaged	
	COVERED	01/01/2024	THROUGH	01/25	/2024			
6	EXPLANATION OF (CORRECTION					-	
7	AFFIDAVIT							
				ear, or affirm, correct.	under pe	nalty of perjury	v, that this corrected	report is true
			Che	ck the box ne	xt to any	and all applica	ble statements:	
					n good fai	th and without	affirm that the origin an intent to mislead ned in the report.	
			X	report not la that the repo	ter than t ort as orig firm, that	he 14th busine jinally filed is in any error or on	that I am filing this c ss day after the date accurate or incomple nission in the report a	l learned ete. l
				T	The Hon	orable Cherv	l Elliott Thornton	
						-	or Officeholder	
	AFFIX NOTARY ST	AMP / SEAL ABOVE						
		ribed before me, by the said					he	day
	of	, 20, to certi	fy which, witness my l	hand and sea	l of office			
	Signature of offic	er administering oath	Printed name of of	ficer administ	ering oatl	n ·	Title of officer admini	stering oath
		Remember To Atta Need	ach Any Part Of led To Report A				ort Form	

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to co	mplete this form.	1 Filer ID (Ethics Comm 00084338	,	2 Total pages	i filed:
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		
OFFICEHOLDER NAME	The Honorable	Cheryl			Date Received	
					ELECTRONI	CALLY FILED
	NICKNAME	LAST		SUFFIX		
		Elliott Thornto	n	CONTIX		
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; A	PT / SUITE #; CIT	ΓY;	ZIP CODE	Date Hand-delivere	d or Date Postmarked
MAILING ADDRESS	REDACTED PER 2	54.0313 GOV/T (CODE		Receipt #	Amount
Change of Address		54.0515, 00710	JODL			
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER NAME	Dr.	Betty				
	NICKNAME	LAST			SUFFIX	
		Lewis			001111	
6 CAMPAIGN TREASURER	STREET ADDRESS (NO	PO BOX PLEASE);	AP	T / SUITE #; CITY;	S	TATE; ZIP CODE
ADDRESS	REDACTED PER 2	54.0313 GOVT (CODE			
(Residence or Business)						
7 CAMPAIGN	AREA CODE PH	ONE NUMBER	EXTENSION			
TREASURER PHONE	(713) 819-5031					
8 REPORT TYPE	January 15	X 30th day before	e election	Runoff		campaign treasurer
					_	officeholder only)
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (A	Attach C/OH-FR)
9 PERIOD	Month Day Yea			Month Day	Year	
COVERED	01/01/2024	Tł	HROUGH	01/25/202	24	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Yea	ar X F	Primary	Runoff	Other	
	03/05/2024		General	Special		
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	「 (if known)	
	District Judge District 1	64 Harris		District Judge D	istrict 164	
		GO T	TO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.et	thics.state.tx.u	S	Ve	rsion V3.5.1.9000c47

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 3 of 16

I

15 NOTICE FROM POLITICAL This box is for notice of political contributions accepted or political expenditures made without the candidate's or officeholder's knowledge or consent. Candidate and officeholders are required to report this information only if they receive notice of such expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. COMMITTEE CAMMITTEE NAME COMMITTEE TYPE COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER NAME S 16 CONTRIBUTION OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) \$ 2 TOTAL POLITICAL CONTRIBUTIONS \$ 14,45 (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$	13 C / OH NAME	Elliott Thornton, Cher	yl (The Honorable)	14 Filer ID 00084338	(Ethics Commission Filers)						
COMMITTEE TYPE COMMITTEE TYPE COMMITTEE NAME GENERAL COMMITTEE ADDRESS GENERAL COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS If TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) S CONTRIBUTION I. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) (OTHER THAN PLEDGES, LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) S CONTRIBUTIOR I. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) S I TOTAL POLITICAL EXPENDITURES S CONTRIBUTION S. TOTAL POLITICAL EXPENDITURES S OUTSTANDING OUTSTANDING 6. TOTAL POLITICAL EXPENDITURES S OUTSTANDING CONTRIBUTION S I TOTAL POLITICAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE S S I TOTAL POLITICAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY S I Swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. The Honorable Cheryl Elliott Thornton Signature of Candidate or Officeholder	FROM POLITICAL	ures made by political of the candidate's or offic	eholder's knowledge or								
COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS COMMITTEE CAMPAIGN TORAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD CONTRIBUTIONS CONTRIBUTIONS CONTRIBUTIONS CONTRIBUTIONS FROM TO FALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD CONTRIBUTIONS CONTRIBUTIONS CONTRIBUTIONS FROM TO FALL OUTSTANDING LOANS AS OF THE LAST DAY S CONTRIBUTION CONTRIBUTIONS CONTRIBUTIONS FROM TO FALL OUTSTANDING LOANS AS OF THE LAST DAY S CONTRIBUTION CONTRIBUTIONS CONTRIBUTIONS CONTRIBUTIONS FROM TO FALL OUTSTANDING LOANS AS OF THE LAST DAY S CONTRIBUTIONS CONTRIBUT		GENERAL	COMMITTEE ADDRESS								
10 COMMITTEE CAMPAIGN TREASURER ADDRESS 11 CONTRIBUTION OR GUARANTEES OF LOANS, OR CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) \$ 12 TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 14,45 2 TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 14,45 2 TOTAL UNITEMIZED POLITICAL EXPENDITURES \$ 2 10 TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 14,45 2 TOTAL UNITEMIZED POLITICAL EXPENDITURES \$ 20,77 3 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 53,36 0 OTSTANDING LOAN TOTALS 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 17 AFFIDAVIT Iswear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.		SPECIFIC									
16 CONTRIBUTION TOTALS 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) \$ 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 14,45 EXPENDITURE TOTALS 3. TOTAL POLITICAL EXPENDITURES \$ 20,77 CONTRIBUTION BALANCE 5. TOTAL POLITICAL EXPENDITURES \$ 20,77 CONTRIBUTION BALANCE 5. TOTAL POLITICAL EXPENDITURES \$ 20,77 OUTSTANDING LOAN TOTALS 6. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 53,36 OUTSTANDING LOAN TOTALS 6. TOTAL POLITICAL MOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 17 AFFIDAVIT Iswear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. The Honorable Cheryl Elliott Thornton Signature of Candidate or Officeholder Signature of Candidate or Officeholder Signature of Candidate or Officeholder			COMMITTEE CAMPAIGN TREASURER NAME								
TOTALS OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) \$ 2 TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 14,45 EXPENDITURE TOTALS 3 TOTAL UNITEMIZED POLITICAL EXPENDITURES \$ 20,77 CONTRIBUTION BALANCE 5 TOTAL POLITICAL EXPENDITURES \$ 20,77 CONTRIBUTION BALANCE 5 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 53,39 OUTSTANDING LOAN TOTALS 6 TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 53,39 17 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. The Honorable Cheryl Elliott Thornton The Honorable Cheryl Elliott Thornton			COMMITTEE CAMPAIGN TREASURER ADDRE	SS							
Image: Contract of the problem of t		\$ 0.00									
EXPENDITURE TOTALS 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES \$ 4. TOTAL POLITICAL EXPENDITURES \$ 20,77 CONTRIBUTION BALANCE 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 53,33 OUTSTANDING LOAN TOTALS 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 17 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. The Honorable Cheryl Elliott Thornton The Honorable Cheryl Elliott Thornton				IS)	\$ 14,450.00						
CONTRIBUTION BALANCE 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 53,35 OUTSTANDING LOAN TOTALS 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 17 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. The Honorable Cheryl Elliott Thornton Signature of Candidate or Officeholder Signature of Candidate or Officeholder			\$ 0.00								
BALANCE REPORTING PERIOD \$ 53,35 OUTSTANDING LOAN TOTALS 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 17 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. The Honorable Cheryl Elliott Thornton Signature of Candidate or Officeholder Signature of Candidate or Officeholder		\$ 20,771.08									
LOAN TOTALS OF THE REPORTING PERIOD \$ 17 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. The Honorable Cheryl Elliott Thornton Signature of Candidate or Officeholder				AST DAY OF THE	\$ 53,398.88						
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. The Honorable Cheryl Elliott Thornton Signature of Candidate or Officeholder				S OF THE LAST DAY	\$ 0.00						
Signature of Candidate or Officeholder	17 AFFIDAVIT		true and correct and includes a								
		The Honorable Cheryl Elliott Thornton									
AFFIX NOTARY STAMP / SEAL ABOVE		Signature of Candidate or Officeholder									
	AFFIX NOTARY STAMP / SEAL ABOVE										
Sworn to and subscribed before me, by the said day of, this the day of, 20, to certify which, witness my hand and seal of office.				, this the	day						
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.900	Ū.	Ū.		Title of office	er administering oath Version V3.5.1.9000c4						

FORM JC/OH COVER SHEET PG 3

4 of 16

18 FILER NAM Elliott Tho	//E rnton, Cheryl (The Honorable)	19 Filer ID 00084338	(Ethics Commission Filers)			
20 SCHEDUL NAME OF	SUBTOTAL AMOUNT					
1. X	\$ 14,450.00					
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	6	\$ 20,771.08			
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	\$			

SUBTOTALS - JC/OH

The Instruc	ction Guide explains how to complete this t	1 Total pages Schedule A(J)1: Sch: 1/4 Rpt: 5/16	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Elliott Thornte	on, Cheryl (The Honorable)		00084338
	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
01/15/2024	Adler, Jim		\$5,000.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77027		
8 Contributor's F	rincipal Occupation	9 Contributor's Job Title	•
Attorney		Attorney	
10 Contributor's e		11 Law firm of contributor's sp	bouse (if any)
Jim Adler & 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 (\$)
01/19/2024	Bryant, Terry		\$1,200.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77024		
	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
	mployer/law firm	Law firm of contributor's sp	bouse (if any)
Self			
It 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 (\$)
01/24/2024	Engelhart, Eva	/	\$250.00
	Contributor address; City; State; Zip Code		•
	Houston, TX 77056		
Contributor's P	rincipal Occupation	Contributor's Job Title	•
Attorney			
	mployer/law firm	bouse (if any)	
	May Cron & Cavin, PC		
If contributor is	s a child, law firm of parent(s) (if any)		
Forms provided l	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V3.5.1.9000c47

The Instruc	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 2/4 Rpt: 6/16	
2 FILER NAME Elliott Thornt	on, Cheryl (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084338	
4 Date 01/08/2024	 Full name of contributor out-of-state PAC (ID#:_ Gibbs, Robin 		7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77002		
Lawyer	rrincipal Occupation	9 Contributor's Job Title Lawyer	
10 Contributor's e		11 Law firm of contributor's sp	oouse (if any)
Gibbs & Brur			
12 If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
01/15/2024	Hagans, William Fred		\$500.00
	Contributor address; City; State; Zip Code Houston, TX 77006		
Contributor's F	rincipal Occupation	Contributor's Job Title	
Attorney		Attorney	
	mployer/law firm	Law firm of contributor's sp	oouse (if any)
Hagans Law			
If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
01/25/2024	Hall, Benjamin		\$1,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77024		
	rrincipal Occupation	Contributor's Job Title Lawyer	
Lawyer	mployer/law firm	pourse (if any)	
Hall Law Firm		oouse (if any)	
	s a child, law firm of parent(s) (if any)		
Formo provide d	ov Texas Ethics Commission www.ethic	s state tx us	Version V3 5 1 9000c47

The Instruc	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 3/4 Rpt: 7/16	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Elliott Thornt	on, Cheryl (The Honorable)		00084338
	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
01/03/2024	Hall, Benjamin		\$1,000.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77024		
8 Contributor's F	rincipal Occupation	9 Contributor's Job Title	
Lawyer		Lawyer	
10 Contributor's e		11 Law firm of contributor's sp	bouse (if any)
Hall Law Gro	•		
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 (\$)
01/03/2024	Kherkher, Steve		\$1,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77098		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
	mployer/law firm	Law firm of contributor's sp	bouse (if any)
Kherkher gar			
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 (\$)
01/03/2024	Manji, Abel		\$500.00
	Contributor address; City; State; Zip Code		
	Sugar Land, TX 77479		
Contributor's F	Principal Occupation		
Attorney			
	mployer/law firm 	bouse (if any)	
Hird Chu & L	•		
If contributor is	a child, law firm of parent(s) (if any)		
Forms provided	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V3.5.1.9000c47

The Instru	ction Guide explains how to comple	1	Total pages Schedule A(J)1: Sch: 4/4 Rpt: 8/16		
2 FILER NAME		3	Filer ID (Ethics Commission Filers)		
	ton, Cheryl (The Honorable)		00084338		
4 Date	5 Full name of contributor Out-of-state	e PAC (ID#:)	7	Amount of Contribution (\$)
01/10/2024	Wotring, Earnest				\$500.00
	6 Contributor address; City; State; Zip Code	•			
	Bellaire, TX 77401				
8 Contributor's I	Principal Occupation	!	9 Contributor's Job Title	I	
Attorney			Attorney		
10 Contributor's e	employer/law firm	:	11 Law firm of contributor's sp	ou	se (if any)
Baker Wotrir	ig LLP				
12 If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor out-of-state	e PAC (ID#:)		Amount of Contribution (\$)
01/24/2024	Zehl, Ryan		/		\$2,500.00
	Contributor address; City; State; Zip Code				
	Houston, TX 77024				
Contributor's I	Principal Occupation		Contributor's Job Title		
Lawyer			Lawyer		
	employer/law firm		Law firm of contributor's sp	ous	se (if any)
Zehl & Asso					
If contributor is	s a child, law firm of parent(s) (if any)				

		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 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: 1/7 Rpt: 9/16	Elliott Thornton, Cheryl (The Honorable)	00084338		
4	Date 01/10/2024	Payee name Amazon			
6	Amount (\$) \$188.36	Payee address; City; State; Zip Code 410 Terry Ave. N. Seattle, WA 98109			
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense office Scanner					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	01/22/2024	Bayou City Strategies			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$1,500.00	PO Box 667204 Houston, TX 77266			
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Ind compliance services		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	01/12/2024	Boykins, Dwight			
	Amount (\$) \$500.00	Payee address;City;State;Zip Code3332 Charleston			
		Houston, TX 77021			
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense DN		
	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 B Candidate/Officeholder/Politica Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Repa Office Ove Polling Ex Printing Ex Salaries/W	yment/Reimbursement rhead/Rental Expense pense gense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2			-	3	Filer ID (Ethics Commission Filers)	
	Sch: 2/7 Rpt: 10/16		Elliott Thornton, Cheryl (The Honorable	e)			00084338	
4	Date	5	Payee name					
	01/12/2024		Crohn's and Colitis Foundation					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de			
	\$2,500.00		5120 Woodway Dr.					
			Houston, TX 77056					
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE		Contributions/Donations Made By	Judioj		outsi	ide of Texas. Complete Schedule T.	
	EXPENDITORE		Candidate/Officeholder/Political Commi	ittee		I, TX	, officeholder living expense	
					donation			
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice sou	ght		Office held	
	Date		Payee name					
	01/11/2024		Direct Cable					
-	Amount (\$)			Zip Co	do			
	\$119.58		2260 E. Imperial Hwy.	210 00	ue			
	ψ119.30		2200 L. Impenar nwy.					
			El Segundo, CA 90245					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	EXPENDITURE		Office Overhead/Rental Expense				ide of Texas. Complete Schedule T.	
					cable for cou		, officeholder living expense	
	Complete <u>ONLY</u> if direct		Candidate/Officeholder name O	office sou	ght		Office held	
	expenditure to benefit C/OI	H						
	Date		Payee name					
	01/04/2024		FastSigns					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$53.45		2929A Milam St.					
			Houston, TX 77006					
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE		Printing Expense				ide of Texas. Complete Schedule T.	
					printing of co		, officeholder living expense	
						nat	Citai	
-	Complete ONLY if direct	Ľ	Candidate/Officeholder name O	office sou	nht		Office held	
	expenditure to benefit C/OF				g			

			EXPENDITURE CATEGORI	ES FOR	BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment								
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)	
	Sch: 3/7 Rpt: 11/16		Elliott Thornton, Cheryl (The Honorable)				00084338	
4	Date 01/02/2024	5	Payee name FastSigns					
6	6 Amount (\$) \$53.45 7 Payee address; City; State; Zip Code \$53.45 2929A Milam St.							
			Houston, TX 77006					
8 PURPOSE OF EXPENDITURE			 (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense printing of collateral 					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Off	fice soug	ht		Office held	
	Date		Payee name					
	01/10/2024		Flowers.com					
	Amount (\$)		Payee address; City; State;	Zip Coo	е			
	\$70.34		Two Jericho Plaza					
			Fl 2					
			Jericho, NY 11753					
	PURPOSE	(a)	Category (See Categories listed at the top of this sched	lule)	b) Description			
	OF EXPENDITURE		Gift/Awards/Memorials Expense	,			de of Texas. Complete Schedule T.	
							officeholder living expense	
					tiowers for co	biiea	age bereavement	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Off	fice soug	ht		Office held	
-	Date		Payee name					
	01/05/2024		Harris County					
	Amount (\$)		Payee address; City; State;	Zip Coo	e			
	\$152.50		1001 Preston St.	•				
			Houston, TX 77002					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sched Office Overhead/Rental Expense	lule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Off	fice soug	ht		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment			Fees Of Food/Beverage Expense Po Gift/Awards/Memorials Expense Pri	ffice Overhe olling Expen rinting Expe alaries/Wag	nse es/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)	
	Sch: 4/7 Rpt: 12/16		Elliott Thornton, Cheryl (The Honorable)				00084338	
4	Date	5	Payee name					
	01/22/2024		Houston Bar Foundation					
6	Amount (\$)	7	Payee address; City; State; Z	Zip Code				
	\$260.00		1111 Bagby St.					
			FLB 200					
			Houston, TX 77002					
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule	(h) Description			
-	OF		Contributions/Donations Made By	ie) (~		outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE		Candidate/Officeholder/Political Committe	ee			officeholder living expense	
					membership	due	es	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Offic	ce sough	t		Office held	
	Date		Payee name					
	01/16/2024		Houston GLBTQ PAC					
	Amount (\$)		Payee address; City; State; Z	Zip Code				
	\$500.00		PO Box 66664					
			Houston, TX 77266					
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule	le) (b) Description			
	OF EXPENDITURE		Contributions/Donations Made By				de of Texas. Complete Schedule T.	
	-		Candidate/Officeholder/Political Committe	e	event sponso		officeholder living expense	
					event sponse	151	ιμ	
	Complete ONLY if direct		Candidate/Officeholder name Offic	ce sough	+		Office held	
	expenditure to benefit C/OI			ee eeagn	•			
_	Date		Pavee name					
	01/02/2024		Human Age Digital					
	Amount (\$)		Payee address; City; State; Z	7in Code				
	\$3,000.00		2700 Post Oak Blvd.	-ip 0000				
	40,000,000		21st Fl					
			Houston, TX 77056					
	DUDDOCE			10				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule	le) (D	Description	outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE		Advertising Expense				officeholder living expense	
					website build			
	Complete <u>ONLY</u> if direct		Candidate/Officeholder name Offic	ce sough	t		Office held	
	expenditure to benefit C/OI	-						

EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel Out of District Gift/Awards/Memorials Expense Printing Expense Travel Out of District Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 5/7 Rpt: 13/16		Elliott Thornton, Cheryl (The Honorable) 00084338	
4	Date 01/25/2024	5	Payee name JPBE Consulting	
6	Amount (\$) \$5,000.00	7	Payee address; City; State; Zip Code PO Box 14226 Houston, TX 77221	
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign consulting	
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		La Griglia	
	Amount (\$) \$625.00		Payee address; City; State; Zip Code 2817 W. Dallas St. State; Zip Code	
			Houston, TX 77019	
	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 deposit for fundraising event	
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sought Office held	
	Date		Payee name	
	01/18/2024		Northeast Houston Ministers Alliance	
	Amount (\$) \$700.00		Payee address; City; State; Zip Code 10229 Mesa Dr.	
			Houston , TX 77078	
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sought Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense 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: 6/7 Rpt: 14/16	Elliott Thornton, Cheryl (The Honorable)	00084338			
4	Date	Payee name				
	01/25/2024	RallyPay				
6	Amount (\$) \$361.60	Payee address; City; State; Zip Code 2626 Cole Ave. Ste. 300 Dallas, TX 75204				
8	PURPOSE OF EXPENDITURE		uutside of Texas. Complete Schedule T. TX, officeholder living expense 2S			
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	Run Sister Run PAC				
	Amount (\$) \$124.00	Payee address; City; State; Zip Code PO BOX 66470				
	PURPOSE OF	Houston, TX 77266 Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense			
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH					
	Date	Payee name				
	01/05/2024	Sprint 2 Print				
	Amount (\$) \$5,022.80	Payee address;City;State;Zip Code8748 Clay Rd.				
		Houston, TX 77080				
	PURPOSE OF EXPENDITURE		uutside 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			

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By 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: Sch: 7/7 Rpt: 15/16	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Elliott Thornton, Cheryl (The Honorable) 00084338			
4	Date 01/02/2024	5 Payee name The Caucus			
6	Amount (\$) \$40.00	7 Payee address; City; State; Zip Code PO Box 66664 Houston, TX 77266			
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense membership dues 			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held			

TEXT ANNOTATION

Sch: 1/1 Rpt: 16/16

FILER NAMEFiler ID (Ethics Commission Filers)Elliott Thornton, Cheryl (The Honorable)00084338

Schedule

Cover Sheet

Information entered by filer as a memo:

Inadvertently omitted a single expenditure of \$500 on 1/12/24 on previously filed 30 day report. This Correction includes the additional expenditure.