FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00088113 3 COMMITTEE NAME **OFFICE USE ONLY** Community Justice PAC Date Received **ELECTRONICALLY FILED** 02/26/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 301228 Date Hand-delivered or Date Postmarked Change of Address Houston, TX 77230 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Jarvis NAME NICKNAME LAST **SUFFIX** Calhoun STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** PO Box 301228 STREET **ADDRESS** (Residence or Business) Houston, TX 77230 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 301228 MAILING **ADDRESS** Houston, TX 77230 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 854-7088 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/26/2024 02/24/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year χ Primary Runoff Other 03/05/2024 General Special

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

| COMMITTEE NAME Community Justice PAG | 2 | | | 13 Filer ID | (Ethics Commission Filers) |
|---|--|---|--|----------------|----------------------------|
| Community Susfice i A | | | | 00088113 | |
| | | Т | | | |
| COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Rand | ly Sarosdy Supreme Cou | rt Justice | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | |
| | | | | | |
| | Measures (Describe by date and location | A. Supported | | | |
| | of election and nature of issue.) | | | | |
| | | B. Opposed | | | |
| | 3. Officeholders | | | | |
| | Assisted (Identify by name or, if applicable, classify by party.) | | | | |
| CONTRIBUTION TOTALS | PLEDGES, LOANS, CONTRIBUTIONS M | D POLITICAL CONTRIE OR GUARANTEES OF ADE ELECTRONICAL qualifies for the higher iter | LY) | \$ | 0.00 |
| | 2. TOTAL POLITICA | | | \$ | C1 000 00 |
| | (OTHER THAN PLE | DGES, LOANS, OR GI | UARANTEES OF LOANS) | | 61,000.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED |) POLITICAL EXPEND | ITURES | \$ | 0.00 |
| | 4. TOTAL POLITICA | L EXPENDITURES | | \$ | 30,306.96 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL OF THE REPORTING | | NTAINED AS OF THE LAST | DAY \$ | 71,194.35 |
| OUTSTANDING LOAN TOTALS | • | AMOUNT OF ALL OUT REPORTING PERIOD | STANDING LOANS AS OF | THE \$ | 0.00 |
| AFFIDAVIT | I . | | | l | |
| | | true and | or affirm, under penalty of pe correct and includes all infor tle 15, Election Code. | | |
| | | | | | |
| | | | | Calhoun | |
| | | | Signature of Ca | mpaign Treasur | er |
| AFFIX NOTARY | STAMP / SEAL ABOVE | | | | |
| Sworn to and subscribed | before me, by the said | | , tl | his the | day |
| of | _, 20, to certify v | vhich, witness my hand | and seal of office. | | |
| | | | | | |
| | | | | | |
| | | | | | |

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC ADDENDUM

Page 3 of 17

| | | | | | | 1 age 0 01 11 |
|----|---|--|--------------|-------------------------------|----------------|----------------------------|
| 12 | COMMITTEE NAME | | | | 13 Filer ID | (Ethics Commission Filers) |
| | Community Justice PAC | | | | 00088113 | |
| | COMMITTEE | 1. Candidates | A Supported | Bonnie Goldstein Supreme Cou | | |
| | ACTIVITY | (Identify by name or, if applicable, classify by party.) | | Bonnie Goldstein Supreme Cod | it Justice | |
| | (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | |
| | | 2. Measures | A. Supported | | | |
| | | (Describe by date and location of election and nature of issue.) | | | | |
| | | | B. Opposed | | | |
| | | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | | |
| | COMMITTEE | Candidates | | Cook December Commence County | 7 | |
| | COMMITTEE ACTIVITY | (Identify by name or, if | A. Supported | Scott Brendetta Supreme Court | Justice | |
| | (Attack lists on plain | applicable, classify by party.) | | | | |
| | (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | |
| | | 2. Measures (Describe by date and location of election and | A. Supported | | | |
| | | nature of issue.) | | | | |
| | | | B. Opposed | | | |
| | | Officeholders Assisted | | | | |
| | | (Identify by name or, if applicable, classify by party.) | | | | |
| | COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | A. Supported | | | |
| | (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | |
| | | 2. Measures | A. Supported | | | |
| | | (Describe by date and location of election and nature of issue.) | | | | |
| | | | B. Opposed | | | |
| | | 3. Officeholders Assisted | | Judge Richard Hightower Court | Of Appeals, Ju | stice |
| | | (Identify by name or, if applicable, classify by party.) | | | | |
| | | | | | | |

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC ADDENDUM

Page 4 of 17

| | | | | | | | | 1 age 1 01 21 |
|----|---|--|--------------|-----------|------------------------------|-----|-------------------|---------------------------|
| 12 | COMMITTEE NAME | | | | | | 13 Filer ID (| Ethics Commission Filers) |
| | Community Justice PAC | | | | | | 00088113 | |
| | | | ΙΛ | Cupperted | Andre Deterili U. O. 2000 | | | al a. a |
| | COMMITTEE ACTIVITY | 1. Candidates (Identify by name or, if applicable, classify by party.) | | Supported | Judge Peter Kelly Court Of C | rin | ninai Appeais, Ju | dge |
| | (Attach lists on plain paper to complete this report if necessary.) | | B. | Opposed | | | | |
| | | 2. Measures | A. | Supported | | | | |
| | | (Describe by date and location of election and nature of issue.) | | | | | | |
| | | | B. | Opposed | | | | |
| | | 3. Officeholders Assisted (Identify by name or, if | | | | | | |
| | | applicable, classify by party.) | - | | | | | |
| | COMMITTEE ACTIVITY | 1. Candidates | Α. | Supported | Velda Faulkner Court Of App | ea | ls, Justice | |
| | | (Identify by name or, if applicable, classify by party.) | | | | | | |
| | (Attach lists on plain paper to complete this report if necessary.) | | B. | Opposed | | | | |
| | | 2. Measures (Describe by date and location of election and nature of issue.) | A. | Supported | | | | |
| | | | B. | Opposed | | | | |
| | | Officeholders Assisted (Identify by name or, if | | | | | | |
| | | applicable, classify by party.) | | | | | | |
| | COMMITTEE ACTIVITY | 1. Candidates (Identify by name or, if applicable, classify by party.) | | Supported | | | | |
| | (Attach lists on plain paper to complete this report if necessary.) | | B. | Opposed | | | | |
| | | 2. Measures (Describe by date and location of election and nature of issue.) | A. | Supported | | | | |
| | | | B. | Opposed | | | | |
| | | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | Judge Jerry Zimmerer Court | Of | Appeals, Justice | |
| | | (Identify by name or, if applicable, classify by party.) |) | | | | | |

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC ADDENDUM

Page 5 of 17

| | | | | | | rage 3 01 17 |
|----|---|---|--------------|----------------------------------|-------------|----------------------------|
| 12 | COMMITTEE NAME | | | | 13 Filer ID | (Ethics Commission Filers) |
| | Community Justice PAC | ; | | | 00088113 | |
| | COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | | Sara Cordua Court Of Appeals, | Justice | |
| | (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | |
| | | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported | | | |
| | | | B. Opposed | | | |
| | | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | | |
| | COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | A. Supported | | | |
| | (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | |
| | | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported | | | |
| | | | B. Opposed | | | |
| | | Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | Judge Kyle Carter District Judge | e | |
| | COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | A. Supported | | | |
| | (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | |
| | | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported | | | |
| | | | B. Opposed | | | |
| | | Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | Judge RK Sandill District Judge | | |
| | | | | | | |

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC **ADDENDUM**

| | | | | | Page 6 01 17 |
|---|--|--------------|--------------------------------|-----------------------------|----------------------------|
| COMMITTEE NAME | ` | | | 13 Filer ID 00088113 | (Ethics Commission Filers) |
| Community Justice PAC | • | | | 00088113 | |
| COMMITTEE ACTIVITY | 1. Candidates (Identify by name or, if applicable, classify by party.) | | Nicole Perdue District Judge | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported | | | |
| | | B. Opposed | | | |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | | |
| COMMITTEE | 1. Candidates | Δ Supported | Erica Hughes District Judge | | |
| ACTIVITY | (Identify by name or, if | A. Supported | Elica Hugiles District Judge | | |
| · | applicable, classify by party.) | | | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported | | | |
| | | B. Opposed | | | |
| | Officeholders Assisted (Identify by name or, if) | | | | |
| | applicable, classify by party.) | | | | |
| COMMITTEE ACTIVITY | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported | | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | |
| | 2. Measures | A. Supported | | | |
| | (Describe by date and location of election and nature of issue.) | | | | |
| | | B. Opposed | | | |
| | 3. Officeholders Assisted (Identify by name or, if | | Robert Schaffer District Judge | | |
| | applicable, classify by party.) | | | | |

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC **ADDENDUM**

| | | | | | | Page 7 of 17 |
|---|--|--------------|---------------|------------------|-------------|----------------------------|
| 12 COMMITTEE NAME | | | | | 13 Filer ID | (Ethics Commission Filers) |
| Community Justice PAC | | | | | 00088113 | |
| ACTIVITY (Identify | y by name or, if able, classify by party.) | | Joy Thomas | District Judge | | |
| paper to complete this report if necessary.) | | B. Opposed | | | | |
| (Descri | leasures libe by date and n of election and of issue.) | A. Supported | | | | |
| | | B. Opposed | | | | |
| As | fficeholders ssisted by by name or, if table, classify by party.) | | | | | |
| ACTIVITY (Identify | andidates by by name or, if hble, classify by party.) | A. Supported | Tracy Good | District Judge | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | | |
| (Descri | ibe by date and n of election and of issue.) | A. Supported | | | | |
| | | B. Opposed | | | | |
| As (Identify | fficeholders ssisted by by name or, if table, classify by party.) | | | | | |
| ACTIVITY (Identify | andidates by by name or, if table, classify by party.) | A. Supported | Allison Mathi | s District Judge | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | | |
| (Descri | leasures ibe by date and n of election and of issue.) | A. Supported | | | | |
| | | B. Opposed | | | | |
| As (Identify | fficeholders ssisted by by name or, if table, classify by party.) | | | | | |
| · | | | | | | |

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC **ADDENDUM**

| | | | | | Page 8 01 17 |
|---|--|--------------|----------------------------------|--------------|----------------------------|
| COMMITTEE NAME | | | | 13 Filer ID | (Ethics Commission Filers) |
| Community Justice PAC | ; | | | 00088113 | |
| COMMITTEE ACTIVITY | 1. Candidates (Identify by name or, if applicable, classify by party.) | | Lillian Alexander District Judge | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported | | | |
| | | B. Opposed | | | |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | | |
| COMMITTEE | 1. Candidates | A. Supported | Juan Aguirre Criminal District C | ourt Judge | |
| ACTIVITY | (Identify by name or, if applicable, classify by party.) | | | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported | | | |
| | | B. Opposed | | | |
| | Officeholders Assisted (Identify by name or, if | | | | |
| | applicable, classify by party.) | | | | |
| COMMITTEE ACTIVITY | 1. Candidates (Identify by name or, if applicable, classify by party.) | | Fransheneka Watson County Pr | robate Court | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported | | | |
| | | B. Opposed | | | |
| | Officeholders Assisted (Identify by name or, if | | | | |
| | applicable, classify by party.) | | | | |
| | | | | | |

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

| | | | | 9 of 17 |
|---------------|--------|--|-----------------------------|----------------------------|
| | | EE NAME ty Justice PAC | 18 Filer ID 00088113 | (Ethics Commission Filers) |
| 19 SCI | HEDULI | | SUBTOTAL AMOUNT | |
| 1. | Х | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ 61,000.00 |
| 2. | | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ |
| 3. | | SCHEDULE B: PLEDGED CONTRIBUTIONS | | \$ |
| 4. | | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION | PR | \$ |
| 5. | | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION | ATION OR | \$ |
| 6. | | SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA | ANIZATION | \$ |
| 7. | | SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | | \$ |
| 8. | | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C | ORGANIZATION | \$ |
| 9. | | SCHEDULE E: LOANS | | \$ |
| 10. | X | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | <u> </u> | \$ 30,306.96 |
| 11. | | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ |
| 12. | | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION | ONS | \$ |
| 13. | | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ |
| 14. | | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | ONS | \$ |
| 15. | | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER | RETURNED | \$ |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
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| | | | | |
| | | | | |

| | MONET | ARY POLITICAL C | SCHEDULE A1 | | | |
|---|----------------------------|--|------------------------|---|---|---|
| | The Instruc | ction Guide explains how | to complete this for | m. | 1 | Total pages Schedule A1: Sch: 1/2 Rpt: 10/17 |
| 2 | FILER NAME Community 3 | FILER NAME Community Justice PAC | | | | Filer ID (Ethics Commission Filers) 00088113 |
| 4 | Date 02/20/2024 | | | 7 | Amount of Contribution (\$) \$25,000.00 | |
| 8 | Principal occu Attorney | Houston, TX 77092 pation / Job title (See Instructions) | 9 | Employer (See Instructions Dick Law firm | 5) | |
| | Date 02/09/2024 | Full name of contributor Lowenberg Law Firm Contributor address; City; Sta | | | | Amount of Contribution (\$) \$25,000.00 |
| | Principal occu | pation / Job title (See Instructions | | Employer (See Instructions |) | |
| | Date 02/20/2024 | Full name of contributor Ramji, Adam Contributor address; City; Sta | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) \$5,000.00 |
| | Principal occu | Houston, TX 77055 pation / Job title (See Instructions) | | Employer (See Instructions Ramji Law Group | 5) | |
| | Date 02/16/2024 | Full name of contributor Randy Sarosdy Contributor address; City; Sta Austin, TX 78731 | |) | | Amount of Contribution (\$) \$500.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> | |
| | Date 02/16/2024 | Full name of contributor Richard Hightower for Jus Contributor address; City; Sta | |) | | Amount of Contribution (\$) \$500.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | () | |
| | | | 1 | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDU | LE A1 |
|---|-------------------------|--|---|--------|--------------------------------------|--------------|
| | The Instru | ction Guide explains how to complete this f | orm. | | pages Schedule A1: 2/2 Rpt: 11/17 | |
| 2 | FILER NAME Community | | | | D (Ethics Commissi | on Filers) |
| 4 | Date 02/16/2024 | Full name of contributor out-of-state PAC (ID#:_ Schaffer, Robert Contributor address; City; State; Zip Code | | 7 Amou | int of Contribution (\$) | \$500.00 |
| | | Houston, TX 77005 | la = 1 (0 1 1 1 1 | | | |
| 8 | Principal occu Judge | upation / Job title (See Instructions) | 9 Employer (See Instructions District Court of Harris (| | | |
| | Date 02/13/2024 | Full name of contributor out-of-state PAC (ID#:_ Tracy Good Campaign Contributor address; City; State; Zip Code |) | Amou | nt of Contribution (\$) | \$500.00 |
| | Principal occu | Katy, TX 77449 upation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 02/23/2024 | Full name of contributor out-of-state PAC (ID#:_ Zavitsanos, John Contributor address; City; State; Zip Code Houston, TX 77010 | | Amou | int of Contribution (\$) | \$4,000.00 |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | | | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel in District

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 1/6 Rpt: 12/17 | Community Justice PAC 00088113 |
| 4 Date | 5 Payee name |
| 01/29/2024 | Allied Signs |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$162.38 | 6820 Harwin Dr |
| | |
| Expenditure from | Houston, TX 77036 |
| corporate funds | |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | Printing |
| | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| | |
| Date | Payee name |
| 02/12/2024 | Allied Signs |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$415.00 | 6820 Harwin Dr |
| | |
| Expenditure from corporate funds | Houston, TX 77036 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Printing Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense Printing |
| | T mung |
| Complete ONLY if direct | Condidate/Officeholder name Office cought Office hold |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | |
| Date | Payee name |
| 02/20/2024 | Allied Signs |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$5,735.00 | 6820 Harwin Dr |
| Expenditure from | |
| corporate funds | Houston, TX 77036 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Printing Expense |
| EXPENDITORE | Check if Austin, TX, officeholder living expense |
| | Printing |
| | |
| 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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 2/6 Rpt: 13/17 | Community Justice PAC 00088113 |
| 4 Date | 5 Payee name |
| 02/20/2024 | Chase Bank |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$6.00 | 270 Park Ave 31st Floor |
| | |
| Expenditure from corporate funds | New York, NY 10017 |
| 8 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 Bank Fee |
| | Dank ree |
| • O I O O O O O O O O O O O O O O O O O | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 02/20/2024 | Competitive Edge Outreach |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$5,000.00 | PO Box 301228 |
| | |
| Expenditure from corporate funds | Houston, TX 77230 |
| 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 Consulting |
| | Consuming |
| Complete <u>ONLY</u> if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/Ol | |
| Date | Payee name |
| 02/07/2024 | EA Ventures |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$1,500.00 | 675 Ponce De Leon Ave NE |
| | |
| Expenditure from corporate funds | Atlanta, TX 30308 |
| 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 Website Development |
| | website Development |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| Complete <u>ONLY</u> if direct 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 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 (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category not listed above)

| Credit Card Payment | The Instruction Guide explains how to complete this form. | | | | | | | |
|---|---|-----|--|--|--|--|--|--|
| 1 Total pages Schedule F1: | | rs) | | | | | | |
| Sch: 3/6 Rpt: 14/17 | Community Justice PAC 00088113 | , | | | | | | |
| 4 Date | 5 Payee name | | | | | | | |
| 02/09/2024 | Foster, William | | | | | | | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | | | | | | | |
| \$750.00 | 14306 Mooreview Ln | | | | | | | |
| | | | | | | | | |
| Expenditure from corporate funds | Houston, TX 77014 | | | | | | | |
| 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 | | | | | | | |
| | Field Consulting | | | | | | | |
| | | | | | | | | |
| Complete ONLY if direct expenditure to benefit C/Ol | L L Candidate/Officeholder name Office sought Office held OH | | | | | | | |
| <u> </u> | | | | | | | | |
| Date | Payee name | | | | | | | |
| 02/08/2024 | M3 Graphics | | | | | | | |
| Amount (\$) | Payee address; City; State; Zip Code | | | | | | | |
| \$487.13 | 11730 Wilcrest Dr | | | | | | | |
| Expenditure from corporate funds | Houston, TX 77099 | | | | | | | |
| | | | | | | | | |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taxas Complete Schedule T | | | | | | | |
| EXPENDITURE | Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | | | | | | | |
| | Printing | | | | | | | |
| | | | | | | | | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | | | | | | | |
| expenditure to benefit C/O | DH | | | | | | | |
| Date | Payee name | | | | | | | |
| 02/20/2024 | M3 Graphics | | | | | | | |
| Amount (\$) | Payee address; City; State; Zip Code | | | | | | | |
| \$422.18 | 11730 Wilcrest Dr | | | | | | | |
| Ψ422.10 | 11750 Wildrest Di | | | | | | | |
| Expenditure from corporate funds | Houston, TX 77099 | | | | | | | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | | | | | |
| OF EXPENDITURE | Printing Expense Check if travel outside of Texas. Complete Schedule T. | | | | | | | |
| | Check if Austin, TX, officeholder living expense | | | | | | | |
| | Printing | | | | | | | |
| 0 1 0 0 1 0 0 1 0 0 1 | | | | | | | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held OH | | | | | | | |
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SCHEDULE F1

The strength of the strength o

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

| 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: 4/6 Rpt: 15/17 | Community Justice PAC 00088113 | | | | | | | |
| 4 Date | 5 Payee name | | | | | | | |
| 02/15/2024 | McNiel, Kathryn | | | | | | | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | | | | | | | |
| \$2,554.27 | 4711 Yoakum Blvd | | | | | | | |
| | | | | | | | | |
| Expenditure from corporate funds | Houston, TX 77006 | | | | | | | |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | | | | | |
| EXPENDITURE | Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | | | | | | | |
| | Reimbursement for Event | | | | | | | |
| | Troiling all control of Event | | | | | | | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | | | | | | | |
| expenditure to benefit C/O | 1 | | | | | | | |
| Date | Payee name | | | | | | | |
| 02/15/2024 | McNiel, Kathryn | | | | | | | |
| Amount (\$) | Payee address; City; State; Zip Code | | | | | | | |
| \$5,000.00 | 4711 Yoakum Blvd | | | | | | | |
| . , | | | | | | | | |
| Expenditure from corporate funds | Houston, TX 77006 | | | | | | | |
| 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 | | | | | | | |
| | Consulting | | | | | | | |
| | Consuming | | | | | | | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | | | | | | | |
| expenditure to benefit C/O | | | | | | | | |
| Date | Dougo nama | | | | | | | |
| 02/05/2024 | Payee name The Cornelius Group | | | | | | | |
| | · | | | | | | | |
| Amount (\$) | Payee address; City; State; Zip Code | | | | | | | |
| \$975.00 | 2526 Business Center Dr | | | | | | | |
| Expenditure from corporate funds | Pearland, TX 77584 | | | | | | | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | | | | | | | |
| OF | Consulting Expense Consulting Expense Consulting Expense Consulting Expense | | | | | | | |
| EXPENDITURE | Check if Austin, TX, officeholder living expense | | | | | | | |
| | Field Consulting | | | | | | | |
| | | | | | | | | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | | | | | | | |
| expenditure to benefit C/OI | | | | | | | | |
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SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

| The Instruction Guide explains how to complete this form. | | | | | | |
|---|--|--|--|--|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) | | | | |
| Sch: 5/6 Rpt: 16/17 | Community Justice PAC | 00088113 | | | | |
| 4 Date | 5 Payee name | | | | | |
| 02/20/2024 | The Cornelius Group | | | | | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Co | nda | | | | |
| \$1,400.00 | 2526 Business Center Dr | oue | | | | |
| \$1,400.00 | 2320 Business Center Di | | | | | |
| Expenditure from corporate funds | Pearland, TX 77584 | | | | | |
| 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 Field Consulting | | | | |
| | | Tield Consulting | | | | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office so | Jaht Office held | | | | |
| expenditure to benefit C/O | | diffice field | | | | |
| | | | | | | |
| Date | Payee name | | | | | |
| 02/22/2024 | The Cornelius Group | | | | | |
| Amount (\$) | Payee address; City; State; Zip Co | ode | | | | |
| \$1,400.00 | 2526 Business Center Dr | | | | | |
| Expenditure from | Pearland, TX 77584 | | | | | |
| corporate funds | | Lax | | | | |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) | (b) Description Check if travel outside of Texas. Complete Schedule T. | | | | |
| EXPENDITURE | Consulting Expense | Check if travel duside of Texas. Complete Scriedule 1. Check if Austin, TX, officeholder living expense | | | | |
| | | Field Consulting | | | | |
| | | | | | | |
| Complete ONLY if direct Candidate/Officeholder name Office sought Office held | | | | | | |
| expenditure to benefit C/O | expenditure to benefit C/OH | | | | | |
| Date | Payee name | | | | | |
| 02/08/2024 | The Daniel Group | | | | | |
| | · | | | | | |
| Amount (\$) | Payee address; City; State; Zip Co | ode | | | | |
| \$1,500.00 | 1401 Cleburne | | | | | |
| Expenditure from corporate funds | Houston, TX 77004 | | | | | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) Description | | | | |
| OF | Consulting Expense | Check if travel outside of Texas. Complete Schedule T. | | | | |
| EXPENDITURE | | Check if Austin, TX, officeholder living expense | | | | |
| | | Data Consulting | | | | |
| | | | | | | |
| Complete ONLY if direct | Candidate/Officeholder name Office sou | ught Office held | | | | |
| expenditure to benefit C/OH | | | | | | |
| | | | | | | |
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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 Salaring Magas/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | ı - I Coı | mmittee | Gift/Awards/Memorial Legal Services The Instruction G | | | pense ages/Contract Labor | | Travel Out of Dis OTHER (enter a | trict category not listed above) | |
|----|--|--------------|---------------|---|----------------------|-------------|------------------------------|----------|-------------------------------------|-------------------------------------|----------|
| ┰ | Total pages Schedule F1: | 2 | EII ED NIAMI | | <u> </u> | | - | 3 | Filer ID | (Ethics Commission Filers) | |
| ľ | | _ | | | | | | 1 | | (Ethics Commission Filers) | <u> </u> |
| L | Sch: 6/6 Rpt: 17/17 | | | Justice PAC | | | | <u> </u> | 00088113 | | |
| 4 | Date | 5 | Payee name | | | | | | | | |
| l | 02/06/2024 | | Vision Forg | e Marketing | | | | | | | |
| - | Amount (\$) | 7 | Payee addre | ss; City; | State. | Zip Coo | | | | | |
| ľ | | ' | | | State, | 21p C00 | | | | | |
| l | \$3,000.00 | | 2245 Texas | 5 DI #300 | | | | | | | |
| I_ | T Expenditure from | | | | | | | | | | |
| ᄔ | corporate funds | | Sugar Land | l, TX 77479 | | | | | | | |
| 8 | PURPOSE | (a) | Catagony | | | 1 | (b) Description | | | | |
| ľ | OF | (ω, | | ee Categories listed at | the top of this sche | edule) | | outeide | e of Teyas, Com | olete Schedule T. | |
| l | EXPENDITURE | | Consulting | Expense | | | | | officeholder living | | |
| | | | | | | | Website Deve | | | 5.45.100 | |
| | | | | | | | Website Beve | Сюр | mone | | |
| ᆫ | | | | | | | | | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OH | , (| Candidate/Off | iceholder name | 0 | office soug | ht | | Office he | eld | |
| l | experiulture to beriefit C/Or | 1 | | | | | | | | | |
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