CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruc	tion Guide explains how to con	nplete this form.	1 Filer ID (Ethics Comm 00088182		2 Total pages fi	led: 26
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		USE ONLY
OFFICEHOLDI NAME	ER Mr.	Danyahel M.			Date Received	
					ELECTRONIC	ALLY FILED
	 NICKNAME	LAST		SUFFIX	02/26/2024	
		Norris		30111X		
4 CANDIDATE /	ADDRESS / PO BOX; A	PT / SUITE #; CIT	ΓY;	ZIP CODE	Date Hand-delivered o	or Date Postmarked
OFFICEHOLDI MAILING	ER 11011 Dahlia Vale Wal	k			Receipt #	Amount
ADDRESS						
Change of Add	Houston, TX 77044				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER	Mr.	Solomon				
NAME						
	 NICKNAME	LAST		SUFFIX		
		Mengisteab		00111/		
		Mengioteus				
6 CAMPAIGN	STREET ADDRESS (NO		۸D	T / SUITE #; CITY;		ATE; ZIP CODE
TREASURER		PO BOX PLEASE),	AP	1/30ITE#, CITT,	517	ATE, ZIP CODE
ADDRESS	12103 Chisel Ridge					
(Residence or Busin						
	Pearland, TX 77584					
7 CAMPAIGN	AREA CODE PH	ONE NUMBER	EXTENSION			
TREASURER	(832) 496-9407		EXTENSION			
PHONE	(032) 490-9407					
8 REPORT						
TYPE	January 15	30th day before	e election	Runoff	15th day after ca	mpaign treasurer
					appointment (offi	ceholder only)
	July 15	X 8th day before	election	Exceeded modified reporting limit	Final Report (Atta	ach C/OH-FR)
9 PERIOD	Month Day Yea	ar		Month Day	Year	
COVERED	01/26/2024	т	HROUGH	02/24/2024	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Yea	ar 🛛 🗙 F	Primary	Runoff	Other	
	03/05/2024		General	 Special		
			Selleral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	·····)			State Representa		
		GO ⁻	TO PAGE 2			
Forms provided b	y Texas Ethics Commission	www.et	thics.state.tx.u	S	Vers	ion V3.5.1.9000c471

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 26

13 C / OH NAME	Norris, Danyahel M.	(Mr.)	14 Filer ID 00088182	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditur These expenditures may have been made without th d officeholders are required to report this information	he candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL	Texas Organizing Project Political Action Con	nmittee	
		COMMITTEE ADDRESS		
	SPECIFIC	PO Box 120296		
		San Antonio, TX 78212		
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	S	
		тх		
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 33,072.07
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS				\$ 0.00
	4. TOTAL POLITIC	CAL EXPENDITURES		\$ 25,615.39
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA	AST DAY OF THE	\$ 4,396.14
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS (RTING PERIOD	OF THE LAST DAY	\$ 10,000.00
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.		
			anyahel M. Norris	
		Signature of t	Candidate or Officeho	lder
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to c	ertify which, witness my hand and seal of office.		
Signature of offic	cer administering	Printed name of officer administering	Title of office	r administering oath
- orms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V3.5.1.9000c47f

SL	JBT	OTALS - C/OH	C		ORM C/OH SHEET PG 3 3 of 26
18 FILE Nor	ER NAN ris, Da	(Ethics Co	ommission Filers)		
		E SUBTOTALS SCHEDULE		SUB	TOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	11,650.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	21,422.07
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	Х	SCHEDULE E: LOANS		\$	10,000.00
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	25,615.39
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD				
9.	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 CONTRIBUTIO	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/10 Rpt: 4/26	
L					-	
2				3	Filer ID (Ethics Commissio	on Filers)
	-	ahel M. (Mr.)			00088182	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	02/22/2024	Achebe, W Chinedu				\$100.00
		6 Contributor address; City; State; Zip Code				
		Missouri City, Texas, TX 77459				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Accountant		Coterra Energy			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/07/2024	Aquino, Neil				\$25.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77007				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Political Stra	tegist	Self			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/23/2024	Blanchard, Molly				\$50.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77009				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	01/29/2024	Brooker, William				\$100.00
		Contributor address; City; State; Zip Code				
		· · · · · · · · · · · · · · · · · · ·				
		Houston, TX 77008				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
⊢	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	01/29/2024	Brown, Carlton				\$1,000.00
		Contributor address; City; State; Zip Code				
1		Houston, TX 77230				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	1 5)		
I	Attorney	· · · ·	Law Offices of Carlton N		Brown, PLLC	
⊢	-					
1						

The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 2/10 Rpt: 5/26
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Norris, Dan	yahel M. (Mr.)		00088182
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
02/23/2024			\$100.00
	6 Contributor address; City; State; Zip Code		1
	TX		
	upation / Job title (See Instructions)	9 Employer (See Instructions	3)
Attorney		City of Houston	
Date	Full name of contributor X out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/13/2024			\$3,000.00
	Contributor address; City; State; Zip Code		
	Washington, DC 20001		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	s)
	spalor, oss and (see monosser),		<i>"</i>
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)
01/29/2024		/	\$100.00
			· · ·
	Houston, TX 77076		
	upation / Job title (See Instructions)	Employer (See Instructions	3)
Executive D	Director - EAMD	Hawes Hill Associates	
Date	Full name of contributor out-of-state PAC (ID#:))	Amount of Contribution (\$)
02/16/2024	Cevallos de Gonzales, Rachel		\$500.00
	Contributor address; City; State; Zip Code]
	тх		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>
President		Identity Plus LLC	<i>"</i>
Date	Full name of contributor out-of-state PAC (ID#:	-	Amount of Contribution (\$)
02/10/2024			\$150.00
	Contributor address; City; State; Zip Code		1
	Dallas, TX 75201		
-	upation / Job title (See Instructions)	Employer (See Instructions	3)
Attorney		Self	

The Instru	iction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 3/10 Rpt: 6/26	
2 FILER NAME			3 Filer ID (Ethics Commission Fi	ilers)
	yahel M. (Mr.)		00088182	
4 Date 02/01/2024	 5 Full name of contributor out-of-state PAC (ID#: Fowler, Stacy 6 Contributor address; City; State; Zip Code)	7 Amount of Contribution (\$)	\$50.00
	San Antonio, TX 78250	2. Employer (Cas Instructions		
8 Principal occu Law Libraria	upation / Job title (See Instructions) an	9 Employer (See Instructions) St. Mary's University	.)	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
02/11/2024	Furse, Anne			\$300.00
	HOUSTON, TX 77005			
	upation / Job title (See Instructions)	Employer (See Instructions)	.)	
Not Employe		Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
02/16/2024	Garner, Paloma			\$50.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77026			
Principal occu Educator	upation / Job title (See Instructions)	Employer (See Instructions) HISD)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
02/15/2024	German, Jevon		\$	\$100.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77020-4412			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)	
Accountant		Tejas Tubular Products		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
02/02/2024	Gipson, Victoria		\$	\$250.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77210			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<i>s</i>)	
Attorney		Attorney		
		<u> </u>		

SCHEDULE	A1
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	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 4/10 Rpt: 7/26	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Norris, Dany	rahel M. (Mr.)			00088182	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	02/13/2024	Greer, Andrea				\$50.00
	02,10,2021	6 Contributor address; City; State; Zip Code				400100
		6 Contributor address, City, State, Zip Code				
		Houston, TX 77009				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> ເ)		
ľ	fundraising		Andrea Greer Consultin			
╞				5		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	#05.00
	02/22/2024	Hack, Tyler				\$25.00
		Contributor address; City; State; Zip Code				
		Scarsdale, NY 10583				
⊢	Dringing ogg	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed)		
╘						
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/29/2024	Hall, Deborah				\$50.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77009		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not employe	20	Not employed			
	Date	Full name of contributor Dut-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	02/21/2024	Herod, Brian				\$75.00
		Contributor address; City; State; Zip Code				
		HOUSTON, TX 77020				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Director		UTHealth Houston			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/29/2024	Jackson, Craig				\$100.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77009				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Law Profess	or	Texas Southern Univers	sity		
⊢			1			

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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/10 Rpt: 8/26	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Norris, Dany	rahel M. (Mr.)			00088182	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	01/26/2024	Johnson, Maurice				\$25.00
		6 Contributor address; City; State; Zip Code				
Ļ		houston, TX 77026-2641		Ĺ		
8		pation / Job title (See Instructions)	9 Employer (See Instructions)	5)		
	Not Employe		Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	± : = 0 00
	02/07/2024	Johnston, Alicia B				\$100.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77007				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Population H		Humana	,		
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Ι	Amount of Contribution (\$)	
	02/23/2024	Johnston, David	/		, where exists a construction (1)	\$100.00
	-	Contributor address; City; State; Zip Code				
		MEADOWS PLACE, TX 77477				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Consultant		Self-employed			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/08/2024	Jordan, Sonia				\$25.00
		Contributor address; City; State; Zip Code				
		Humble, TX 77396				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ו)		
	Not Employe		Not Employed	,		
╞	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	01/28/2024	Lewis, Keland	/			\$250.00
		Contributor address; City; State; Zip Code				• -
		Houston, TX 77004				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		OCI Global			
			<u> </u>			
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	The Instru	ction Guide explains how to complete th	nis form.	1	Total pages Schedule A1: Sch: 6/10 Rpt: 9/26	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	Norris, Dany	ahel M. (Mr.)			00088182	ŕ
4	Date	5 Full name of contributor out-of-state PAC	(ID#:)	7	Amount of Contribution (\$)	
	02/20/2024	Lucas, D Pulane				\$50.00
		6 Contributor address; City; State; Zip Code				
		Richmond, VA 23238				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructio	ns)		
	Professor		Reynolds College			
F	Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	02/16/2024	Lujan, Sara				\$100.00
		Contributor address; City; State; Zip Code				
		Humble, TX 77346				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructio	ns)		
	Executive Di	rector	University of Houston			
	Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	02/06/2024	Millar, Ron				\$25.00
		Contributor address; City; State; Zip Code				
		Arlington, VA 22201				
		pation / Job title (See Instructions)	Employer (See Instructio			
	PAC Coordin	nator	Center for Freethough	it Eq	uality	
	Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	02/24/2024	Norris, Danyahel				\$1,350.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77044				
		pation / Job title (See Instructions)	Employer (See Instructio	ns)		
	Attorney		City of Houston			
	Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	02/09/2024	Nwaokelemeh, Chibuike				\$100.00
		Contributor address; City; State; Zip Code				
L		Midland, TX 79701				
		pation / Job title (See Instructions)	Employer (See Instructio			
	Lawyer		Legal Aid of Northwes	t Te	(as	
I I						

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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/10 Rpt: 10/26	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Norris, Dany	rahel M. (Mr.)			00088182	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	02/05/2024	Orr, Adam				\$100.00
		6 Contributor address; City; State; Zip Code		1		
	ļ					
	ļ					
		HUMBLE, TX 77396-4144				
8		pation / Job title (See Instructions)	9 Employer (See Instructions			
	IT Business	Analyst	Symmetry Energy Soluti	tion	s	
	Date	Full name of contributor out-of-state PAC (ID#:)	Ι	Amount of Contribution (\$)	
	02/08/2024	Pope, James				\$500.00
	ļ	Contributor address; City; State; Zip Code		1		
	ļ					
	ļ					
		Houston, TX 77036	·			
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Attorney		The Pope Law Firm			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/16/2024	Reeder, Takea]		\$100.00
	ļ	Contributor address; City; State; Zip Code				
	ļ					
	ļ	Pearland, TX 77584				
\vdash	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Director		CNP	5)		
╞				T	Array at Contribution (\$)	
	Date 02/20/2024	Full name of contributor out-of-state PAC (ID#: Pichards Assata-Nicole)		Amount of Contribution (\$)	\$250.00
	0212012024	Richards, Assata-Nicole		-		Φ200.00
	ļ	Contributor address; City; State; Zip Code				
	ļ					
	ļ	Houston, TX 77004				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	L		
		Developer and Operator	Community Care Coope		ive	
⊨	Date	Full name of contributor out-of-state PAC (ID#:		Т	Amount of Contribution (\$)	
	01/29/2024	Rivlin, Sarah	/		Allount of Contingation (4)	\$100.00
	0_,	Contributor address; City; State; Zip Code		•		*=
	ļ					
	ļ					
	ļ	Houston, TX 77017				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Teacher		HISD			
⊢						

	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 8/10 Rpt: 11/26	
2	FILER NAME			3 Filer ID (Ethics Commission	Filers)
	Norris, Dany	/ahel M. (Mr.)		00088182	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	:)	7 Amount of Contribution (\$)	
	02/11/2024	Robinson, Lisa			\$100.00
	l	6 Contributor address; City; State; Zip Code			
	I				
	I				
		Houston, TX 77025			
		ipation / Job title (See Instructions)	9 Employer (See Instructions	\$)	
	Not Employe	ed	Not Employed		
F	Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)	
	01/31/2024	Robles, David			\$200.00
	1	Contributor address; City; State; Zip Code			
	I				
	I				
		Houston, TX 77020			
	-	upation / Job title (See Instructions)	Employer (See Instructions		
	Inside Sales	/Purchasing	Ameripipe Supply Comp	Dany	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	02/20/2024	Spehr, Alex			\$25.00
	I	Contributor address; City; State; Zip Code	Ţ		
	I				
	l				
		Alameda, CA 94501		-	
	-	upation / Job title (See Instructions)	Employer (See Instructions	\$)	
	Not Employe		Not Employed		
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)	_
	02/05/2024	Syed, Sarah			\$500.00
	I	Contributor address; City; State; Zip Code			
	I				
	I	Lauston TV 77065			
┡	Drizoinal agou	Houston, TX 77065	Employer (Cool Instructions		
		upation / Job title (See Instructions)	Employer (See Instructions Woori Juntos	;)	
╘	Manager				
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)	#100.00
	02/19/2024	Taylor, Ashton			\$100.00
	I	Contributor address; City; State; Zip Code			
	I				
	I	Houston, TX 77057			
┡	Bringinal occu		Employer (See Instructions	<u></u>	
	Attorney	upation / Job title (See Instructions)	Employer (See Instructions A Taylor Law Firm	<i>i)</i>	
┡	Automey				

	The Instruc	ction Guide explains how to comp	1	Total pages Schedule A1: Sch: 9/10 Rpt: 12/26			
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	Norris, Dany	ahel M. (Mr.)				00088182	
4	Date	5 Full name of contributor out-of-sta	ate PAC (ID#:)	7	Amount of Contribution (\$)	
	02/08/2024	Texas AFT					\$1,000.00
		6 Contributor address; City; State; Zip Cod	le				
		Austin, TX 78704					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
╞	Date	Full name of contributor out-of-sta	ate PAC (ID#:)		Amount of Contribution (\$)	
	02/10/2024	Thomas, Casey					\$100.00
		Contributor address; City; State; Zip Cod	le				
		Dallas, TX 75249					
		pation / Job title (See Instructions)	5)				
	Director		Dallas College				
	Date	Full name of contributor out-of-sta)		Amount of Contribution (\$)		
	01/29/2024	Thompson, Tamisha					\$50.00
		Contributor address; City; State; Zip Cod	le				
		Angleton, TX 77515					
┝	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Paralegal			Harris County Attorney (ice	
⊨	Date	Full name of contributor	ate PAC (ID#:)		Amount of Contribution (\$)	
	02/11/2024	Wasden, Kay)			\$25.00
		Contributor address; City; State; Zip Cod	le				
		Houston, TX 77096					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Musician			Self			
	Date	—	ate PAC (ID#:)		Amount of Contribution (\$)	
	02/21/2024	schechter, lillie					\$100.00
		Contributor address; City; State; Zip Cod	le				
		bouston TV 77091					
\vdash	Dringingl oppu	houston, TX 77021		Employer (See Instructions			
	consultant	pation / Job title (See Instructions)		Employer (See Instructions self)		
┝	consultant			501			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 10/10 Rpt: 13/26 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Norris, Danyahel M. (Mr.) 00088182 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 7 01/29/2024 \$100.00 van Denzen, Melody 6 Contributor address; City; State; Zip Code Humble, TX 77396 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Lawyer ConocoPhillips

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	iction Guide explains how to complete this f	1 Total pages Schedule A2:					
	· · ·	orm.	Sch: 1/1 Rpt: 14/26				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
-	yahel M. (Mr.)		00088182				
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$				
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution contribution (\$) description				
02/24/2024	Becnel, Anza 7 Contributor address; City; State; Zip Code		\$1,200.00 Community open house event at the Harris County Democratic Headquarters				
	Houston, TX 77003		Check if travel outside of Texas. Complete Schedule T.				
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)				
Founder/Dir	rector	Growing Real Alter	natives Everywhere				
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)				
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)				
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
Date	Full name of contributor 🔲 out-of-state PAC (ID#:)	Amount of In-kind contribution				
02/08/2024	Texas AFT		contribution (\$) description				
	Contributor address; City; State; Zip Code		\$10,000.00 Canvassing, Printing and Consulting Services				
	Austin, TX 78704		Check if travel outside of Texas. Complete Schedule T.				
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON-JUDICIAL) (See instructions)					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributc	of contributor's spouse (if any) (FOR JUDICIAL)				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution				
02/17/2024	Texas Organizing Project Political Action Comm	ittee	contribution (\$) description				
	Contributor address; City; State; Zip Code		\$10,222.07 Canvassing, Printing and Consulting Services				
	San Antonio, TX 78212		Check if travel outside of Texas. Complete Schedule T.				
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)				
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)					
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1					

LOANS					SCHEDULE E		
The Instruction	Guide explains how to	complete this f	orm.		ges Schedule E: 1 Rpt: 15/26		
 FILER NAME Norris, Danyahel M 	1. (Mr.)			3 Filer ID 000881	(Ethics Commission Filers) 82		
⁴ TOTAL OF UNIT	EMIZED LOANS				\$		
5 Date of loan 7 02/23/2024	Name of lender Norris, Danyahel	out-of-state PA	C (ID#:)	9 Loan Amount (\$) \$10,000.00		
6 Is lender a 8 financial institution? No	Lender address; City;	State;	Zip Code		10 Interest Rate 0 11 Maturity Date		
NO	Houston, TX 77044				12/31/2024		
	/ Job title (See Instructions)		13 Employer (See Instruc	tions)	1		
Attorney			City of Houston				
14 Description of Collate	eral			is were deposited	d into political account (See Instructions)		
	7 Name of guarantor				19 Amount Guaranteed (\$)		
X not applicable	8 Guarantor address; City;	State;	Zip Code				
20 Principal occupation			21 Employer (See Instruc	tions)	I		

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment				Event Expense 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							Travel in District Travel Out of Di	Equip t istrict	ment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME	Ξ						3	Filer ID	(E	thics Commission Filers)
	Sch: 1/11 Rpt: 16/26		Norris, Dan	Norris, Danyahel M. (Mr.) 00088182									
4	Date	5 Payee name											
	02/05/2024	Cerillion N4 Partners											
6	6 Amount (\$) 7 Payee address; City; State; Zip Code												
	\$10,000.00	\$10,000.00 TX											
8	PURPOSE OF	(a)	Category (S				edule)	(b)	Description				
	EXPENDITURE		Contribution Candidate/0				ittee			, TX,	de of Texas. Con officeholder livin al ads		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder	name	C	Office sou	ght			Office h	eld	
	Date		Payee name										
	02/11/2024		Chukwu, Cl	niamaka									
	Amount (\$)		Payee addre	ss; C	city;	State;	Zip Co	de					
	\$100.00												
			ТХ										
	PURPOSE OF EXPENDITURE	(a)	Category _{(S} Salaries/Wa				edule)			, TX,	de of Texas. Con officeholder living ination		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	ceholder	name	C	Office sou	ght			Office h	eld	
-	Date		Payee name										
	01/29/2024		Dollar Gene	eral									
	Amount (\$) \$17.86		Payee addre	ss; C	City;	State;	Zip Co	de					
			ТХ										
	PURPOSE OF EXPENDITURE	(a)	Category _{(S} Office Supp		es listed at the top	o of this sche	edule)			, TX,	de of Texas. Con officeholder livin		
ļ	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Off	ceholder	name	С	Office sou	ght			Office h	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 Fees Food/Beverage Expense Gift/Awards/Memorials Expense nittee Legal Services The Instruction Guide explains	Office Overhead Polling Expense Printing Expense Salaries/Wages/	e Travel Out of District Contract Labor OTHER (enter a category not listed above)									
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)										
	Sch: 2/11 Rpt: 17/26	Norris, Danyahel M. (Mr.)		00088182									
4	Date	Payee name											
	02/24/2024	Emmanuel, Demarcus											
6	Amount (\$) 7 Payee address; City; State; Zip Code												
	\$240.00	\$240.00 TX											
8	PURPOSE	Category (See Categories listed at the top of this sc	hedule) (b)	Description									
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.									
				Check if Austin, TX, officeholder living expense Security for event at democratic party headquarters									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name	Office sought	Office held									
	Date	Payee name											
	02/24/2024	Fellowship United District Association											
	Amount (\$)	Payee address; City; State	; Zip Code										
\$500.00													
		ГХ											
	PURPOSE	Category (See Categories listed at the top of this sc	hedule) (b)	Description									
	OF EXPENDITURE	Gift/Awards/Memorials Expense		Check if travel outside of Texas. Complete Schedule T.									
				Check if Austin, TX, officeholder living expense Scholarship donation									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name	Office sought	Office held									
	Date	Payee name											
	02/06/2024	Fiesta											
	Amount (\$) \$4.79	Payee address; City; State	e; Zip Code										
		гх	i										
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sc Food/Beverage Expense	, ,	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Snacks for civic club									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/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	ommittee	Fees Office Overhead/Rental Expense Tr. Food/Beverage Expense Polling Expense Tr. Gift/Awards/Memorials Expense Printing Expense Tr.						aising Expense quipment & Related Expense rrict category not listed above)				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID							(Ethics Commission Filers)				
	Sch: 3/11 Rpt: 18/26	Norris, D	anyahel M. (Mr.)					00088182					
4	Date	Payee nar											
	02/06/2024	Foster, W	/illiam										
6 Amount (\$) 7 Payee address; City; State; Zip Code \$100.00 TX													
8	PURPOSE					b) Description							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Sign posting													
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/0	Officeholder name	C	Office soug	ht		Office he	ld				
	Date	Payee nar	ne										
	01/29/2024	HEB											
	Amount (\$) \$192.49	Payee add	lress; City;	State;	; Zip Cod	e							
	PURPOSE OF EXPENDITURE		(See Categories listed at the rerage Expense	e top of this sch	edule) (ı, TX	de of Texas. Comp officeholder living of for fundraise	expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/0	Officeholder name	C	Office soug	ht		Office he	ld				
	Date	Payee nar	ne										
	01/31/2024	Harris Co	ounty Democratic P	arty									
	Amount (\$) \$103.75	Payee add	Iress; City;	State;	; Zip Cod	e							
		ТХ											
	PURPOSE OF EXPENDITURE) Category Event Ex	(See Categories listed at the pense	e top of this sch	edule) (ı, TX	de of Texas. Comp , officeholder living ;eto					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/0	Officeholder name	C	Office soug	ht		Office he	ld				

	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 Ex mittee Legal Services The Instruction Guid		Office Over Polling Exp Printing Ex Salaries/W	oense 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: 4/11 Rpt: 19/26		Norris, Danyahel M. (Mr.)					00088182					
4	Date	5	Payee name				-						
	02/01/2024	Houston Black American Democrats											
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code											
8	PURPOSE	(a)	Category (See Categories listed at the t	op of this sche	edule)	(b) Description							
	OF Event Expense EXPENDITURE Event Expense												
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ht		Office held					
	Date		Payee name										
	02/16/2024		Houston Black American Dem	nocrats									
Amount (\$) Payee address; City; State; Zip Code \$500.00 TX													
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the t Advertising Expense	op of this sche	edule)	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Get out the vote campaign for poll workers and advertisement of endorsement							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ht		Office held					
	Date		Payee name										
	02/16/2024		Identity Plus										
	Amount (\$) \$188.00		Payee address; City;	State;	Zip Coo	le							
			ТХ										
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the t Salaries/Wages/Contract Lab		edule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Diffice souç	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		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: 5/11 Rpt: 20/26	Norris, Danyahel M. (Mr.)	00088182										
4	Date	5 Payee name											
	02/11/2024	Inspire Church											
6	Amount (\$) \$50.00	7 Payee address; City; State; Zip Code TX											
 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Church donation 													
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held										
	Date	Payee name											
	01/28/2024	Jacobs, Wanda											
	Amount (\$) \$1,300.00	Payee address; City; State; Zip Code											
	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											
	02/04/2024	Jacobs, Wanda											
	Amount (\$) \$1,300.00	Payee address; City; State; Zip Code											
		ТХ											
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense										
	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							/Rental Expense contract Labor		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: 6/11 Rpt: 21/26		Norris, Danyahe	l M. (Mr.)						00088182			
4	Date	5 Payee name											
	02/09/2024		Jacobs, Wanda										
6 Amount (\$) \$1,300.00 TX													
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Canvassing													
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeho	lder name	C	Office sou	ght			Office he	eld		
	Date		Payee name										
	02/20/2024		Jacobs, Wanda										
	Amount (\$) \$1,300.00		Payee address; TX	City;	State;	Zip Coo	de						
	PURPOSE OF EXPENDITURE		Category _{(See Cate} Salaries/Wages,			edule)				le of Texas. Com officeholder living			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeho	lder name	C	Office sou	ght			Office he	eld		
	Date		Payee name										
	02/23/2024		Jacobs, Wanda										
	Amount (\$) \$1,300.00		Payee address;	City;	State;	Zip Co	de						
			ТХ										
	PURPOSE OF EXPENDITURE		Category _{(See Cat} Salaries/Wages,			edule)				le of Texas. Com officeholder living	plete Schedule T. expense		
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeho	lder name	C)ffice souç	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							d/Rental Expense e /Contract Labor		Travel in Distric Travel Out of D	Equipme t istrict	Expense nt & Related Expense ry not listed above)	
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethi	cs Commission Filers)	
	Sch: 7/11 Rpt: 22/26		Norris, Dany	rahel M.	(Mr.)					00088182			
4	Date 02/23/2024	5	Payee name Jacobs, Wanda										
6	Amount (¢)	7											
0	Amount (\$) \$2,480.00	7 Payee address; City; State; Zip Code TX											
8	PURPOSE	(a)	Category (Se	e Categories	listed at the top of this	schedule)	(b)	Description					
OF EXPENDITURE Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Poll workers													
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder r	ame	Office sou	ight			Office h	eld		
	Date		Payee name										
	02/12/2024		Kingdom Bu	ilders Ca	athedral								
	Amount (\$)		Payee addres	s; Cit	y; St	ate; Zip Co	ode						
	\$250.00		ТХ										
	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 Seniors ball							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder r	name	Office sou	ight			Office h	eld		
	Date		Payee name										
	02/07/2024		Kravetz, Rut	h									
	Amount (\$) \$100.00		Payee addres	s; Cit	y; St	ate; Zip Co	ode						
			ТХ										
	PURPOSE OF	(a)			listed at the top of this		(b)	Description					
	OF EXPENDITURE		Transportati Expense	on Equip	oment & Relate	d			, TX,	de of Texas. Con officeholder livin Ind meal	•		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offic	eholder r	ame	Office sou	ight			Office h	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 Fees Food/Beverage Expense Gift/Awards/Memorials Expens ittee Legal Services The Instruction Guide ex	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:	ILER NAME		:	3 Filer ID (Ethics Commission Filers)					
	Sch: 8/11 Rpt: 23/26	lorris, Danyahel M. (Mr.)	00088182							
4	Date 02/19/2024	5 Payee name Mailchimp								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$143.91	TX								
8	PURPOSE OF EXPENDITURE	OF Advertising Expense								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sough	t	Office held					
	Date	ayee name								
	02/09/2024 New Pleasant Hill Church									
	Amount (\$) \$50.00	ayee address; City; X	State; Zip Code							
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top o vent Expense	utside of Texas. Complete Schedule T. TX, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sough	t	Office held					
	Date	ayee name								
	02/18/2024 North Shore Community Fellowship of Faith Church									
	Amount (\$) \$25.00	ayee address; City;	State; Zip Code							
		x								
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description (b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Church donation									
	Complete ONLY if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sough	t	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/Reimbur Fees Office Overhead/Rental Expense Polling Expense - Gift/Awards/Memorials Expense Printing Expense			l/Rental Expense e 'Contract Labor		Transportation E Travel in District Travel Out of Di						
1	Total pages Schedule F1:	FILER NAME							3	Filer ID	(Ethics Commission Filers	5)	
	Sch: 9/11 Rpt: 24/26		Norris, Dany	yahel N	M. (Mr.)						00088182		
4	Date	5	Payee name										
	01/29/2024		Oben Studio	DS									
6	Amount (\$) \$318.75												
8	PURPOSE	(a)	Category (Se	ee Catego	ries listed at the to	op of this sch	edule)	(b)	Description				
	OF EXPENDITURE	Salaries/Wages/Contract Labor											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offi	ceholde	er name	C	Office sou	ght			Office h	eld	
	Date		Payee name										
	01/28/2024 Pleasant Hill Baptist Church												
	Amount (\$) \$25.00		Payee addres	SS;	City;	State;	Zip Co	de					
	PURPOSE OF EXPENDITURE		Category _{(Se} Gift/Awards,				edule)			, тх,	de of Texas. Con officeholder living	nplete Schedule T. g expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offi	ceholde	er name	C	Office sou	ght			Office h	eld	
	Date		Payee name										
	02/19/2024		Sprint 2 Prir	nt									
	Amount (\$) \$2,052.71		Payee addres	5S;	City;	State;	Zip Co	de					
			ТХ										
	PURPOSE OF EXPENDITURE		Category _{(Se} Printing Exp		ries listed at the to	op of this sch	edule)			, тх,	officeholder living	nplete Schedule T. g expense	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Offi	ceholde	er name	С	Dffice sou	ght			Office h	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/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: 10/11 Rpt: 25/26	Norris, Danyahel M. (Mr.)	00088182								
4	Date	Payee name									
	02/02/2024	5 Payee name TGM Printing									
6	Amount (\$)	7 Payee address; City; State; Zip Code									
	\$1,353.13	TX									
8	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description									
	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 250 Yard signs 									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	02/04/2024	Tabernacle of Praise									
	Amount (\$) \$25.00	Payee address; City; State; Zip Code									
	DUDDOSE										
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Church donation											
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	02/18/2024	True Vine									
	Amount (\$) \$25.00	Payee address; City; State; Zip Code									
		ТХ									
	PURPOSE OF EXPENDITURE	outside of Texas. Complete Schedule T. n, TX, officeholder living expense I tiON									
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								

			EXPENDITURE CATEO	ORIES FOR B	OX 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	Office Overhea Polling Expens Printing Expen		Transportation Travel in Distri Travel Out of I	
	Clean Cara Payment	-	The Instruction Guide explai	ns how to comp	lete this form.		
1	Total pages Schedule F1:	2 FILER NAM	E			3 Filer ID	(Ethics Commission Filers)
	Sch: 11/11 Rpt: 26/26	Norris, Dar	iyahel M. (Mr.)			00088182	
4	Date	5 Payee name	9			1	
	02/04/2024		rkers Church				
6	Amount (\$) \$20.00	7 Payee addre		ate; Zip Code			
		ТХ					
8	PURPOSE OF EXPENDITURE		See Categories listed at the top of this S/Memorials Expense	schedule) (b)		outside of Texas. Co n, TX, officeholder livi I tion	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ficeholder name	Office sought		Office	held
1							