CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

	`	ics Commission Filers)	2 Total pages filed:			OFFICE	USE ONLY
(00080580		63			Date Received	
	CANDIDATE /	MS / MRS / MR	FIRST		MI	ELECTRONI	CALLY FILED
	OFFICEHOLDER NAME	The Honorable	Jarvis			05/01/2024	
	V) (IVIE	NICKNAME	LAST		SUFFIX		
			Johnson				
4 (ORIGINAL	January 15	Runoff	Other ((specify)	Date Hand-delivere	d or Date Postmarked
F	REPORT TYPE	July 15	Exceeded modified	ш .		Receipt #	Amount
		30th day before election	15th day after cam	· • —		-	
			appointment (office	holder only)		Date Processed	
		X 8th day before election	Final Report (Attac	n C/OH-FR)		_	
	ORIGINAL PERIOD	Month Day Yea		Month Day	Year	Date Imaged	
	COVERED	03/26/2024	THROUGH	04/24/2024			
	EXPLANATION OF C						
		received in the mail by the	J : : ,				
· ,	AFFIDAVIT		I sw	rear or affirm under r	nenalty of perior	v, that this correc	ted report is true
, ,	AFFIDAVIT			rear, or affirm, under p	penalty of perjur	y, that this correc	ted report is true
, ,	AFFIDAVIT		and	correct.			ted report is true
7 /	AFFIDAVIT		and				ted report is true
, ,	AFFIDAVIT		and	correct.	y and all applica	able statements:	
,	AFFIDAVIT		and	correct. ck the box next to any Semiannual report was made in good f	y and all applica ts: I swear, o faith and withou	able statements: r affirm that the or t an intent to misle	iginal report ead or to
, ,	AFFIDAVIT		and	correct. ck the box next to any Semiannual report	y and all applica ts: I swear, o faith and withou	able statements: r affirm that the or t an intent to misle	iginal report ead or to
7 /	AFFIDAVIT		and Che	correct. ck the box next to any Semiannual report was made in good f misrepresent the inf	y and all applica ts: I swear, o faith and withou formation conta	able statements: r affirm that the or t an intent to misk ined in the report.	riginal report ead or to
7 /	AFFIDAVIT		and	correct. ck the box next to any Semiannual report was made in good f	y and all applica ts: I swear, o faith and withou formation conta swear, or affirm	able statements: r affirm that the or t an intent to misle ined in the report. t, that I am filing th	riginal report ead or to his corrected
, ,	AFFIDAVIT		and Che	Semiannual report was made in good f misrepresent the info	y and all applica ts: I swear, o faith and withou formation conta swear, or affirm the 14th busing riginally filed is i	able statements: r affirm that the or t an intent to misle ined in the report. t, that I am filing thess day after the or naccurate or income	riginal report ead or to his corrected date I learned mplete. I
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7 /		AMP / SEAL ABOVE	and Che	Semiannual report was made in good f misrepresent the inf Other reports: I report not later than that the report as or swear, or affirm, that filed was made in g	y and all applica ts: I swear, o faith and withou formation conta swear, or affirm the 14th busine riginally filed is i at any error or o ood faith.	r affirm that the or t an intent to misk ined in the report. I, that I am filing the ess day after the on accurate or incomission in the rep	riginal report ead or to his corrected date I learned mplete. I
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7 /	AFFIX NOTARY ST		and Che	Semiannual report was made in good f misrepresent the inf Other reports: I report not later than that the report as or swear, or affirm, that filed was made in g The Signat	y and all applica ts: I swear, o faith and withou formation conta swear, or affirm the 14th busin riginally filed is i at any error or o ood faith. e Honorable Ja ure of Candidat	r affirm that the or t an intent to misle ined in the report. In, that I am filing the ess day after the on accurate or incomission in the report. Arvis Johnson e or Officeholder	riginal report ead or to his corrected date I learned mplete. I ort as originally
7 /	AFFIX NOTARY ST Sworn to and subsc	AMP / SEAL ABOVE ribed before me, by the sai	and	Semiannual report was made in good f misrepresent the inf Other reports: I report not later than that the report as or swear, or affirm, that filed was made in g The Signat	y and all applica ts: I swear, o faith and withou formation conta swear, or affirm the 14th busin riginally filed is i at any error or o ood faith. e Honorable Ja ure of Candidat , this	r affirm that the or t an intent to misle ined in the report. In, that I am filing the ess day after the on accurate or incomission in the report. Arvis Johnson e or Officeholder	riginal report ead or to his corrected date I learned mplete. I ort as originally
7 /	AFFIX NOTARY ST Sworn to and subsc	ribed before me, by the sai	and	Semiannual report was made in good f misrepresent the inf Other reports: I report not later than that the report as or swear, or affirm, that filed was made in g The Signat	y and all applica ts: I swear, o faith and withou formation conta swear, or affirm the 14th busin riginally filed is i at any error or o ood faith. e Honorable Ja ure of Candidat , this	r affirm that the or t an intent to misle ined in the report. In, that I am filing the ess day after the on accurate or incomission in the report. Arvis Johnson e or Officeholder	riginal report ead or to his corrected date I learned mplete. I ort as originally
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Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

	Guide explains how to com	ıplete this form.	1 Filer ID (Ethics Commi 00080580		2 Total pages filed: 63			
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY			
NAME	The Honorable	Jarvis			Date Received ELECTRONICALLY FILED			
	NICKNAME	LAST Johnson		SUFFIX	05/01/2024			
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; A	PT / SUITE #; CIT	Y;	ZIP CODE	Date Hand-delivered or Date Postmarked			
MAILING ADDRESS	1051 Cottage Oak				Receipt # Amount			
Change of Address	Houston, TX 77091				Date Processed			
					Date Imaged			
5 CAMPAIGN	MS / MRS / MR	FIRST		MI				
TREASURER NAME	Mrs.	Cleo						
	NICKNAME	LAST Johnson-McLa	aughlin	SUFFIX				
6 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO F 1051 Cottage Oak Ln.	O BOX PLEASE);	AP ⁻	T / SUITE #; CITY;	STATE; ZIP CODE			
(Residence or Business)	Houston, TX 77091							
7 CAMPAIGN TREASURER PHONE	AREA CODE PHO (832) 890-4130	ONE NUMBER E	EXTENSION					
8 REPORT TYPE	January 15 July 15	30th day before		Runoff Exceeded modified reporting limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Yea 03/26/2024		HROUGH	Month Day 04/24/202	Year 4			
10 ELECTION	ELECTION DATE Month Day Yea 05/04/2024	ar DP	Primary General	ELECTION TYPE Runoff X Special	Other			
11 OFFICE	OFFICE HELD (if any) State Representative Di	istrict 139		12 OFFICE SOUGHT State Senator Dis				
	GO TO PAGE 2							

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

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13 C / OH NAME	Johnson, Jarvis (The	Honorable)	14 Filer ID (E 00080580	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without I officeholders are required to report this information	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION		ZED POLITICAL CONTRIBUTIONS (OTHER THA		
TOTALS	OR GUARANTE	ES OF LOANS, OR CONTRIBUTIONS MADE ELE	CTRONICALLY)	\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 227,983.33
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 108,336.01
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 94,491.13
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 35,000.00
17 AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
			orable Jarvis Johnson Candidate or Officeholo	
		Signature of	Candidate of Officeriolic	ici
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to ce	ertify which, witness my hand and seal of office.		
Signature of offi	cer administering	Printed name of officer administering	Title of officer	administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

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					4 01 00
18 FIL	ER NAN	1E	19 Filer ID	(Eth	nics Commission Filers)
Jol	nnson,	Jarvis (The Honorable)	00080580		
		E SUBTOTALS			SUBTOTAL AMOUNT
NA	ME OF		_	00B10171E71III00111	
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	201,633.66
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	26,349.67
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	X	SCHEDULE E: LOANS		\$	0.00
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	108,336.01
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	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL C	NS 	SCHEDULE A1				
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/18 Rpt: 5/63		
2	FILER NAME Johnson, Ja	rvis (The Honorable)			3	Filer ID (Ethics Commission 00080580	on Filers)	
4	Date 04/03/2024	5 Full name of contributorA Better Texas PAC6 Contributor address; City; St.	out-of-state PAC (ID#: ate; Zip Code		7	Amount of Contribution (\$)	\$2,000.00	
		Austin, TX 78701						
8	Principal occu	pation / Job title (See Instructions	9	9 Employer (See Instruction:	s)			
	Date 04/23/2024	Full name of contributor Across the Track PAC Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5,000.00	
	Dringinal occu	Houston, TX 77021 pation / Job title (See Instructions	·	Employer (See Instruction	e)			
	r illicipai occu	pation / 300 title (See Instructions		Employer (See Instruction	3)			
	Date 04/18/2024	Full name of contributor Adams, Beatrice Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00	
	Principal occu	Houston, TX 77066 pation / Job title (See Instructions		Employer (See Instruction	e)			
	Admin Asst	pation / Job title (See Instructions		US District Court	3)			
	Date 03/26/2024	Full name of contributor Allen Boon Humphries Ro Contributor address; City; St Houston, TX 77027				Amount of Contribution (\$)	\$2,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction:	s)			
	Date 04/10/2024	Full name of contributor Beer Alliance of Texas PA Contributor address; City; St. Austin, TX 78701				Amount of Contribution (\$)	\$1,500.00	
	Principal occu	pation / Job title (See Instructions		Employer (See Instructions	s)			
			I					

	MONET	ARY POLITICAL CONTRIBU	TION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete th	his for	n.	1	Total pages Schedule A1: Sch: 2/18 Rpt: 6/63	
2	FILER NAME Johnson, Jai	rvis (The Honorable)			3	Filer ID (Ethics Commission 00080580	n Filers)
4	Date 04/03/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$250.00
Ω	Principal occu	Austin, TX 78738 pation / Job title (See Instructions)	la la	Employer (See Instructions	-, 		
•	Lobbyist	pation / Job title (See instructions)	9	Self	·)		
	Date 04/10/2024	Full name of contributor)		Amount of Contribution (\$)	\$200.00
	Deinsinal assu	Houston, TX 77002		Franksian (Cookastanations	<u></u>		
	Attorney	pation / Job title (See Instructions)		Employer (See Instructions LeviBenton & Assoc PL			
	Date 03/29/2024	Full name of contributor out-of-state PAC Bernstein, Karen Contributor address; City; State; Zip Code	(ID#:)	•	Amount of Contribution (\$)	\$25.00
		Houston, TX 77030					
	Principal occu Engineer	pation / Job title (See Instructions)		Employer (See Instructions NASA	5)		
	Date 04/13/2024	Full name of contributor out-of-state PAC Bloom, John Contributor address; City; State; Zip Code Houston, TX 77008)	•	Amount of Contribution (\$)	\$100.00
	Principal occu Self employe	pation / Job title (See Instructions)		Employer (See Instructions self	<u>s)</u>		
	Date 04/20/2024	Full name of contributor out-of-state PAC Boykin, Rodrick Contributor address; City; State; Zip Code Houston, TX 77004)	•	Amount of Contribution (\$)	\$250.00
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions W&B LogisticsLLC	5)		
			1				

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDULE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/18 Rpt: 7/63	
2	FILER NAME Johnson, Jai	vis (The Honorable)		3	Filer ID (Ethics Commission Filers) 00080580	
4	Date 03/26/2024	 Full name of contributor out-of-state PAC (ID#:_Bracewellpac Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$) \$1,000.	00
8	Principal occu	Houston, TX 77002 pation / Job title (See Instructions)	9 Employer (See Instructions	;) 		
	i illicipai occu	pation / Job title (See Instructions)	2 Employer (See manucuona	,,		
	Date 04/23/2024	Full name of contributor out-of-state PAC (ID#:_Branch III, Theldon Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$2,500.	00
	Principal occu	Houston, TX 77025 pation / Job title (See Instructions)	Employer (See Instructions	·/		
	Consultant	pation / Job title (See Instructions)	Self	·)		
	Date 04/09/2024	Full name of contributor out-of-state PAC (ID#:_Brooks, Jeri Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$1,000.	00
		Houston, TX 77010				
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions One World Strategy Gro			
	Date 04/08/2024	Full name of contributor out-of-state PAC (ID#:_ Carpenter, Bill Contributor address; City; State; Zip Code Houston, TX 77084			Amount of Contribution (\$) \$25.	00
	Principal occu Self employe	pation / Job title (See Instructions)	Employer (See Instructions Self employed	5)		
	Date 04/01/2024	Full name of contributor out-of-state PAC (ID#:_ Charter Schools Now PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$) \$25,000.	00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			,			

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to	complete this forn	1.	1	Total pages Schedule A1: Sch: 4/18 Rpt: 8/63	
2	FILER NAME Johnson, Jai	rvis (The Honorable)			3	Filer ID (Ethics Commission 00080580	on Filers)
4	Date 04/16/2024	Clay, Robert	out-of-state PAC (ID#: Zip Code)	7	Amount of Contribution (\$)	\$2,500.00
8	Dringinal occu	Houston, TX 77027 pation / Job title (See Instructions)	lo.	Employer (See Instructions			
0		Development		Clay Development	,		
	Date 04/01/2024	Full name of contributor	out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$25.00
	Dringing agg	Buford, GA 30519		Employer (Coo Instructional			
	Senior Analy	pation / Job title (See Instructions) est		Employer (See Instructions Sharp)		
	Date 04/18/2024	Full name of contributor	out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$100.00
		Austin, TX 78767					
	Principal occu State official	pation / Job title (See Instructions)		Employer (See Instructions State of Texas)		
	Date 04/08/2024	Full name of contributor Collier, Nicole Contributor address; City; State; 2 Fort Worth, TX 76112	out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu State Official	pation / Job title (See Instructions)		Employer (See Instructions State of Texas)		
	Date 04/09/2024	Full name of contributor Conner, Matthew Contributor address; City; State; 2 Cypress, TX 77433	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu Managing Pa	pation / Job title (See Instructions) artner		Employer (See Instructions Arete Public Affairs)		
	3 3						

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUI	E A1
	The Instru	ction Guide explains how	v to complete this f	orr	n.	1	Total pages Schedule A1: Sch: 5/18 Rpt: 9/63	
2	FILER NAME Johnson, Jai	rvis (The Honorable)				3	Filer ID (Ethics Commission 00080580	on Filers)
4	Date 04/20/2024	5 Full name of contributor Cornelius, Christina6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$100.00
0	Dringing oggu	Houston, TX 77088	٥)	0	Employer (See Instructions	<u></u>		
8	Consultant	pation / Job title (See Instruction	5)	9	Employer (See Instructions Self	»)		
	Date 04/10/2024	Full name of contributor Crawford, Cindy Contributor address; City; S)		Amount of Contribution (\$)	\$500.00
	Deinsinal assu	Houston, TX 77019	-)		Franks on (Cook bathwetic no			
	Lobbyist	pation / Job title (See Instruction	S)		Employer (See Instructions Self	5)		
	Date 04/11/2024	Full name of contributor Ellis, Rodney Contributor address; City; S	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$2,500.00
		Houston, TX 77005						
	Principal occu Commission	pation / Job title (See Instruction er	s)		Employer (See Instructions Harris County	s)		
	Date 04/03/2024	Full name of contributor Focused Advocacy Contributor address; City; S Austin, TX 78701)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instruction	s)		Employer (See Instructions	5)		
	Date 04/11/2024	Full name of contributor German, Lillian Contributor address; City; S Washington, DC 20002	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$250.00
		pation / Job title (See Instruction overnment relations	s)		Employer (See Instructions Ferring Pharmaceuticals			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 6/18 Rpt: 10/63	
2	FILER NAME Johnson, Jai	vis (The Honorable)		3	Filer ID (Ethics Commission 00080580	on Filers)
4	Date 04/03/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$250.00
_		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 04/10/2024	Full name of contributor out-of-state PAC (ID#: Gilliam, Lance Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Dringing agg	Houston, TX 77027	Employer (See Instructions	_		
	Real Estate	pation / Job title (See Instructions)	WSG-RE LLC	')		
	Date 03/26/2024	Full name of contributor out-of-state PAC (ID#: Grace & McEwan Consulting LLC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 04/01/2024	Full name of contributor out-of-state PAC (ID#: Greenberg Traurig, P.A. Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 04/02/2024	Full name of contributor out-of-state PAC (ID#: Gulf States Toyota Inc State PAC Contributor address; City; State; Zip Code Houston, TX 77077			Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()		
			1			

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/18 Rpt: 11/63	
2	FILER NAME Johnson, Jai	rvis (The Honorable)		3	Filer ID (Ethics Commission 00080580	on Filers)
4	Date 04/05/2024	 Full name of contributor out-of-state PAC (ID#:_ Harris County Deputies Organization Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
_	Deignigal	Houston, TX 77009	D. Frankriger (Co.) Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 04/20/2024	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Self employe	ed	self			
	Date 04/20/2024	Full name of contributor out-of-state PAC (ID#:_ Hollimon, Allen Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77027				
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions Nationwide Investigation	,	& Security Inc	
	Date 04/05/2024	Full name of contributor out-of-state PAC (ID#:_Hollis, Glen Contributor address; City; State; Zip Code Houston, TX 77092			Amount of Contribution (\$)	\$25.00
	Principal occu Self employe	pation / Job title (See Instructions) ed	Employer (See Instructions Self employed	s)		
	Date 04/08/2024	Full name of contributor out-of-state PAC (ID#:_ Homepac of Texas: Texas Association of Builde Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/18 Rpt: 12/63		
2	FILER NAME Johnson, Ja	rvis (The Honorable)		3	Filer ID (Ethics Commission 00080580	on Filers)	
4	Date 04/08/2024	5 Full name of contributor out-of-state PAC (ID#:_ Houston Apartment Association PAC 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$2,000.00	
_		Houston, TX 77041					
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions))			
	Date 04/01/2024	Full name of contributor out-of-state PAC (ID#:_ Houston Fire Fighters PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5,000.00	
	Principal occu	Houston, TX 77009 upation / Job title (See Instructions)	Employer (See Instructions)			
	Date 04/01/2024	Full name of contributor out-of-state PAC (ID#:_ Houston, Jacqueline Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00	
	Principal occu	Houston, TX 77016 upation / Job title (See Instructions)	Employer (See Instructions)			
	Self Employe	ed	Self Employed				
	Date 03/26/2024	Full name of contributor out-of-state PAC (ID#:_ Hunton Andrews Kurth Texas PAC Contributor address; City; State; Zip Code Houston, TX 77002)		Amount of Contribution (\$)	\$500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 04/02/2024	Full name of contributor out-of-state PAC (ID#:_ Independent Insurance Agents of Texas PAC Contributor address; City; State; Zip Code Austin, TX 78768)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUI	E A1	
	The Instru	ction Guide explains how to	o complete this form	n.	1	Total pages Schedule A1: Sch: 9/18 Rpt: 13/63	
2	FILER NAME Johnson, Jai	rvis (The Honorable)			3	Filer ID (Ethics Commission 00080580	on Filers)
4	Date 04/15/2024	5 Full name of contributorJones, Previn6 Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code		7	Amount of Contribution (\$)	\$500.00
_	Deignaignal	Humble, TX 77396	lo.	Franklavar (Caa kastuvatiana			
8	Self	pation / Job title (See Instructions)	9	Employer (See Instructions CES	5)		
	Date 03/29/2024	Full name of contributor Jordan, Justin Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Houston, TX 77089 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
		Government Affairs		Vice President	,		
	Date 04/15/2024	Full name of contributor Jordan, Marc Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$15.00
		Fresno, TX 77545					
	Principal occu Self Employe	pation / Job title (See Instructions) ed		Employer (See Instructions MLJ management service)		llc	
	Date 04/03/2024	Full name of contributor Kercheval, Todd Contributor address; City; State Georgetown, TX 78628	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$250.00
	Principal occu Lobbyist	pation / Job title (See Instructions)		Employer (See Instructions Self)		
	Date 04/02/2024	Full name of contributor Lambi, Chris Contributor address; City; State Houston, TX 77006	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$6,000.00
	Principal occu IT Specialist	pation / Job title (See Instructions) S		Employer (See Instructions Self Employed	5)		
			<u>'</u>				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/18 Rpt: 14/63	
2	FILER NAME Johnson, Ja	rvis (The Honorable)		3	Filer ID (Ethics Commission F 00080580	-ilers)
4	Date 03/31/2024	5 Full name of contributor out-of-state PAC (ID#:_ Lamborn, Kelsey 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Houston, TX 77018 upation / Job title (See Instructions)	9 Employer (See Instructions			
0	Attorney	pation 7 300 title (See instructions)	Chevron	,		
	Date 04/02/2024	Full name of contributor out-of-state PAC (ID#:_ Legacy 44 Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$20	0,000.00
	Principal occu	Austin, TX 78756 Ipation / Job title (See Instructions)	Employer (See Instructions)		
	Date 04/12/2024	Full name of contributor out-of-state PAC (ID#:_Linebarger Goggan Blair & Sampson, LLP Contributor address; City; State; Zip Code Austin, TX 78760			Amount of Contribution (\$)	1,000.00
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)		
	Date 04/04/2024	Full name of contributor out-of-state PAC (ID#:_Loewy, Adam Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$) \$5	5,000.00
	Principal occu Lawyer	pation / Job title (See Instructions)	Employer (See Instructions Loewy Law Firm)		
	Date 04/01/2024	Full name of contributor out-of-state PAC (ID#:_ Longbow Consulting Partners LLC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 11/18 Rpt: 15/63	
2	FILER NAME Johnson, Jai	rvis (The Honorable)		3	Filer ID (Ethics Commission 00080580	n Filers)
4	Date 04/11/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$3,500.00
8	Principal occu	Findlay , OH 45840 pation / Job title (See Instructions)	9 Employer (See Instructions	;) 		
_			5 Employer (See instructions	'' 		
	Date 04/15/2024	Full name of contributor out-of-state PAC (ID#: MURRAY, LINDA Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu	HOUSTON, TX 77050 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe	ed	Not Employed			
	Date 04/20/2024	Full name of contributor)		Amount of Contribution (\$)	\$100.00
	Principal occu	Rosharon, TX 77583 pation / Job title (See Instructions)	Employer (See Instructions	;) 		
	Fire Marshal		City of Houston	<i>''</i>		
	Date 04/10/2024	Full name of contributor out-of-state PAC (ID#:_ Meyers, Lucas Contributor address; City; State; Zip Code Austin, TX 78759			Amount of Contribution (\$)	\$500.00
	Principal occu Consultant	pation / Job title (See Instructions)	Employer (See Instructions Self	<u> </u>		
	Date 04/10/2024	Full name of contributor out-of-state PAC (ID#:_ Miles, Borris Contributor address; City; State; Zip Code Houston, TX 77004)		Amount of Contribution (\$)	\$1,500.00
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Senator State of Texas					

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 12/18 Rpt: 16/63		
2	FILER NAME Johnson, Ja	ILER NAME ohnson, Jarvis (The Honorable)		3	Filer ID (Ethics Commission 00080580	on Filers)	
4	Date 04/12/2024	5 Full name of contributor out-of-state PAC (ID#:_Mims, Genie 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$25.00	
_	Delicalis al access	Houston, TX 77018	0 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
8	Retired	ipation / Job title (See Instructions)	9 Employer (See Instructions retired	5)			
	Date 04/21/2024	Full name of contributor out-of-state PAC (ID#:_Moore-Fontenot, Susan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00	
	Principal occu	Baytown, TX 77521 upation / Job title (See Instructions)	Employer (See Instructions	()			
	Self employe		self	,			
	Date 04/10/2024	Full name of contributor out-of-state PAC (ID#:_ Munoz, Lindsay Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00	
		Houston, TX 77027					
	Principal occu Consulting	pation / Job title (See Instructions)	Employer (See Instructions Whitmire & Munoz LLC	i)			
	Date 04/03/2024	Full name of contributor out-of-state PAC (ID#:_NRG Energy PAC Contributor address; City; State; Zip Code Princeton, NJ 08540-6213)		Amount of Contribution (\$)	\$1,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 04/17/2024	Full name of contributor out-of-state PAC (ID#:_ Oncor Texas State PAC Contributor address; City; State; Zip Code Dallas, TX 75202-1234			Amount of Contribution (\$)	\$2,500.00	
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	()			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 13/18 Rpt: 17/63	
2	FILER NAME Johnson, Ja	rvis (The Honorable)		3	Filer ID (Ethics Commission 00080580	on Filers)
4	Date 04/05/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Houston, TX 77057 pation / Job title (See Instructions)	9 Employer (See Instructions			
<u> </u>	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 04/24/2024	Full name of contributor out-of-state PAC (ID#:_ Phillips 66 PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.66
	Deinsinal assu	Washington, DC 20004	Franks von (Cook both vot in no			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/26/2024	Full name of contributor out-of-state PAC (ID#:_ Plains All American PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,000.00
		Houston, TX 77002				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 04/02/2024	Full name of contributor out-of-state PAC (ID#:_ Precast PAC Contributor address; City; State; Zip Code Austin, TX 78716			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 04/10/2024	Full name of contributor out-of-state PAC (ID#:_Rash, Jeanette Contributor address; City; State; Zip Code Houston, TX 77020			Amount of Contribution (\$)	\$500.00
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions Zone One Auto)		

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	o complete this forn	n.	1	Total pages Schedule A1: Sch: 14/18 Rpt: 18/63	
2	FILER NAME Johnson, Jai	rvis (The Honorable)			3	Filer ID (Ethics Commission 00080580	on Filers)
4	Date 04/18/2024	5 Full name of contributor Roberts, Dianna6 Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code		7	Amount of Contribution (\$)	\$25.00
8	Princinal occu	Houston, TX 77025 pation / Job title (See Instructions)	9	Employer (See Instructions	.)		
0	Data Manage			UT MD Anderson Cance		Center	
	Date 04/22/2024	Full name of contributor Rose, Toni Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Dallas, TX 75241					
	Principal occu State official	pation / Job title (See Instructions)		Employer (See Instructions State of texas	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	04/10/2024	Royce West Campaign Contributor address; City; State					\$1,500.00
		Dallas, TX 75203					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 04/08/2024	Full name of contributor Schwartz Page & Harding, L Contributor address; City; State Houston, TX 77056)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Date 04/20/2024	Full name of contributor Scott II, Ira Contributor address; City; State Houston, TX 77071	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$150.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions retired)		
			<u>'</u>				

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 15/18 Rpt: 19/63	
2	FILER NAME Johnson, Ja	rvis (The Honorable)		3	Filer ID (Ethics Commission 00080580	on Filers)
4	Date 04/19/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$2,500.00
8	Principal occu	Houston, TX 77219 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	Fillicipal occu	pation / 300 title (3ee instructions)	Employer (See Instructions	,		
	Date 04/08/2024	Full name of contributor out-of-state PAC (ID#:_Sidney, Cynthia Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$150.00
	Principal occu	Houston, TX 77053 pation / Job title (See Instructions)	Employer (See Instructions			
	Self employe		Self employed	,		
	Date 04/09/2024	Full name of contributor out-of-state PAC (ID#:_ Smith, Lynell Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Richmond, TX 77469				
	Principal occu Self employe	pation / Job title (See Instructions) ed	Employer (See Instructions) Self employed)		
	Date 04/14/2024	Full name of contributor out-of-state PAC (ID#:_ Snowden, Paulette Contributor address; City; State; Zip Code Houston, TX 77040)		Amount of Contribution (\$)	\$15.00
	Principal occu SECY	pation / Job title (See Instructions)	Employer (See Instructions St. Timothy Lutheran)		
	Date 04/02/2024	Full name of contributor out-of-state PAC (ID#:_ Spencer, Latrisha Contributor address; City; State; Zip Code Missouri City, TX 77489			Amount of Contribution (\$)	\$25.00
	Principal occu Owner	pation / Job title (See Instructions)	Employer (See Instructions Cookieface Cosmetics)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/18 Rpt: 20/63		
2	FILER NAME Johnson, Ja	rvis (The Honorable)		3	Filer ID (Ethics Commission 00080580	ion Filers)	
4	Date 04/09/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$10,000.00	
_	Deignaignal annu	Austin, TX 78768	O Franks or (Cas Instructions				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))			
	Date 03/28/2024	Full name of contributor out-of-state PAC (ID#:_ TSA PAC)		Amount of Contribution (\$)	\$3,000.00	
	Principal occu	Austin, TX 78701-1665 pation / Job title (See Instructions)	Employer (See Instructions)			
	Date	Full name of contributor out-of-state PAC (ID#:_		,	Amount of Contribution (\$)		
	04/08/2024	TXOGA PAC Contributor address; City; State; Zip Code			, another of Continuation (c)	\$2,000.00	
	Dringing age	Austin, TX 78701	Employer (See Instructions				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 04/03/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Association of Fire Fighters Contributor address; City; State; Zip Code Austin, TX 78745)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 04/01/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Automobile Dealers Association PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 17/18 Rpt: 21/63		
2	FILER NAME Johnson, Ja	rvis (The Honorable)		3	Filer ID (Ethics Commissio 00080580	n Filers)	
4	Date 04/03/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00	
_	Daine in all account	Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))			
	Date 04/02/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Medical Association PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 04/03/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Restaurant Association Contributor address; City; State; Zip Code Houston, TX 77007			Amount of Contribution (\$)	\$2,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 04/15/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Sands PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$50,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 04/24/2024	Full name of contributor out-of-state PAC (ID#:_ The Keiter Law Firm PLLC Contributor address; City; State; Zip Code Houston, TX 77002)		Amount of Contribution (\$)	\$1,518.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUI	LE A1	
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 18/18 Rpt: 22/63	
2	FILER NAME Johnson, Jai	rvis (The Honorable)			3	Filer ID (Ethics Commission 00080580	on Filers)
4	Date 04/01/2024	5 Full name of contributorUniversity of Houston PAC6 Contributor address; City; Sta			7	Amount of Contribution (\$)	\$2,500.00
8	Principal occu	Houston, TX 77227 pation / Job title (See Instructions)	Ţ	Employer (See Instructions	 		
		,		. ,, , (,		
	Date 04/03/2024	Full name of contributor Wholesale Beer Distributor Contributor address; City; Sta				Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 04/22/2024	Full name of contributor Williams, Silvia Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu	Houston, TX 77078 pation / Job title (See Instructions)		Employer (See Instructions self	<u> </u> ;)		
	Date 04/10/2024	Full name of contributor Wilson, Gerald Contributor address; City; Sta)		Amount of Contribution (\$)	\$250.00
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions CARDINAL MEMORIAL		CQUISITION COMPANY	
	Date 04/12/2024	Full name of contributor Zone, Sean Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Principal occu Self employe	pation / Job title (See Instructions) ed		Employer (See Instructions self	5)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	action Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/3 Rpt: 23/63				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
	arvis (The Honorable)		00080580			
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$				
5 Date 04/01/2024	5 Date 04/01/2024 6 Full name of contributor out-of-state PAC (ID#: Baldwin, Derrick 7 Contributor address; City; State; Zip Code		8 Amount of 9 In-kind contribution contribution (\$) description \$1,500.00 Campaign Vehicle			
	Houston, TX 77071		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)			
Sales		Novartis				
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 contribute	or's spouse (if any) (FOR JUDICIAL)			
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
10 ii continuator	is a clillu, law lillii of parefil(s) (ii aliy) (FOR JODICIAL)					
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution			
04/01/2024	Bankable Equity		contribution (\$) description \$7,500.001 office space			
	Contributor address; City; State; Zip Code		I			
			_			
	Houston, TX 77027	T	Check if travel outside of Texas. Complete Schedule T.			
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	e (FOR JUDICIAL) (See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or'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			
04/01/2024	Bankable Equity		contribution (\$) description			
	Contributor address; City; State; Zip Code		\$300.00 Office internet			
			į			
	Houston, TX 77027		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			(FOR JUDICIAL) (See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	itor's spouse (if any) (FOR JUDICIAL)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1				
	, ., .,					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A2: Sch: 2/3 Rpt: 24/63
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Johnson, Ja	arvis (The Honorable)	00080580	
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$	
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution
04/01/2024	Bankable Equity		contribution (\$) description \$1,200.00 10 phone lines
	7 Contributor address; City; State; Zip Code		I
	Houston TV 77027		
10 Drive in all acco	Houston, TX 77027	14 Franks von (FOR NON	Check if travel outside of Texas. Complete Schedule T.
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)
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 contribute	or'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
04/03/2024	Blackridge		contribution (\$) description \$350.00 fundraiser eblast
	Contributor address; City; State; Zip Code		S350.00 Turidraiser ebiast
			_
	Austin, TX 78701	1	Check if travel outside of Texas. Complete Schedule T.
Principal occı	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
	(500 NIDION)	0	(505)(504)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Combuilerate	employer/law firm (FOR JUDICIAL)	Lavréines of a catallavit	orde employee (if emply (FOR HIDIOIAL)
Contributors	employer/law liftii (FOR JODICIAL)	Law IIIII of Contribute	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a shild law firm of parent(s) (if any) (EOD JUDICIAL)		
ii contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
<u> </u>			T
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description
04/20/2024	Cazares Group, INC		\$7,500.00 event location fundraising
	Contributor address; City; State; Zip Code		
			į į
	Houston, TX 77009		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. J-JUDICIAL) (See instructions)
i ililoipai occi	apadion 7 dob dide (1 dix 14dix dobion/le) (eee memers)	Employer (Foretvore	(dobien, L)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
	p		(
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
	, , , , , , , , , , , , , , , , , , , ,		· · · · · · · · · · · · · · · · · · ·
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1	

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 3/3 Rpt: 25/63				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
	arvis (The Honorable)		00080580			
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$			
5 Date	6 Full name of contributor ut-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution			
04/20/2024	Cazares Group, INC		contribution (\$) description \$2,450.001 food, drinks for fundraiser			
	7 Contributor address; City; State; Zip Code		φ2,430.00 1100α, απίκε τοι ταπαταίετε 			
			_			
	Houston, TX 77009	T	Check if travel outside of Texas. Complete Schedule T.			
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)			
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 contribute	or'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			
04/10/2024	Locke Lord LLP		contribution (\$) description			
Contributor address; City; State; Zip Code			\$3,049.67 Reception expense			
			į į			
	Dallas, TX 75201-6776		Check if travel outside of Texas. Complete Schedule T.			
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-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 contribute	or's spouse (if any) (FOR JUDICIAL)			
If contributor i	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 contribution (\$) description			
04/10/2024	Locke Lord LLP		contribution (\$) description \$2,500.00 Third party fundraiser fee			
	Contributor address; City; State; Zip Code		party ramarases res			
			i			
	Delles TV 75201 6776		_			
5	Dallas, TX 75201-6776	T = 1 (505.110)	Check if travel outside of Texas. Complete Schedule T.			
Principal occupation / 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)			
Contributors	piniopal occupation (i or occion L)		(1 31 30 31 31 12)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)			
	, , , , , , , , , , , , , , , , , , , ,		· · · · · · · · · · · · · · · · · · ·			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	I				

	LOANS					SCHEDU	ILE E
	The Instruction	on Guide explains how to	complete this f	form. 1 Total pages Schedule E: Sch: 1/1 Rpt: 26/63			
	FILER NAME Johnson, Jarvis	(The Honorable)			(Ethics Commission 580	n Filers)	
4	TOTAL OF UN	IITEMIZED LOANS			\$	0.00	
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$))
	Is lender a financial institution?	8 Lender address; City	r; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instruct	ons)		
14	Description of Coll None	ateral		15 Check if personal funds	were deposite	ed into political account (See Instructions	
	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guarant	eed (\$)
	not applicable	18 Guarantor address; City	y; State;	Zip Code			
20	Principal occupation	on		21 Employer (See Instruct	ons)		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

The Instruction Guide explains how to con	mplete this form.
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Johnson, Jarvis (The Honorable)	00080580
5 Payee name	
Abell, Benjamin	
7 Payee address; City; State; Zip Coo	de
2231 Ada Lane	
Round Rock, TX 78664	
(a) Category (See Categories listed at the top of this schedule)	(b) Description
Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Wages
	wages
Candidate/Officeholder name Office sour	ght Office held
H	Jill Office field
Payee name	
Abell, Benjamin	
Payee address; City; State; Zip Coo	de
2231 Ada Lane	
Round Rock, TX 78664	
(continued and the continued,	(b) Description
Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	food expense for fundraiser
	1000 expense for fundicises
Condidate/Officeholder name Office sour	ght Office held
H	Jiit Office field
1	
Payee name	
Amazon	
Payee address; City; State; Zip Coo	de
440 Terry Ave N,	
Seattle, WA 98109	
(a) Category (See Categories listed at the top of this schedule)	(b) Description
Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	office supplies
	ght Office held
. 1	
	The Instruction Guide explains how to core 2 FILER NAME Johnson, Jarvis (The Honorable) 5 Payee name Abell, Benjamin 7 Payee address; City; State; Zip Core 2231 Ada Lane Round Rock, TX 78664 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Abell, Benjamin Payee name Abell, Benjamin Payee address; City; State; Zip Core 2231 Ada Lane Round Rock, TX 78664 (a) Category (see Categories listed at the top of this schedule) Food/Beverage Expense Candidate/Officeholder name Amazon Payee name Amazon Payee address; City; State; Zip Core 440 Terry Ave N, Seattle, WA 98109 (a) Category (see Categories listed at the top of this schedule)

SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Frinting Expense Legal Services Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/37 Rpt: 28/63	Johnson, Jarvis (The Honorable) 00080580
4	Date	5 Payee name
	04/09/2024	American Screen Graphics
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$562.00	1701 Northpark Dr #33
		Kingswood, TX 77339
8	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.
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		printing expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/11/2024	Anderson, Justin
	Amount (\$)	Payee address; City; State; Zip Code
	\$120.00	4311 Bungalow Lane
		Houston, TX 77047
	PURPOSE	(a) Category (See 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.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		wages
	Operation ONLY if allowed	Out district Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/18/2024	Anderson, Justin
	Amount (\$)	Payee address; City; State; Zip Code
	\$202.50	4311 Bungalow Lane
		Houston, TX 77047
	PURPOSE	(a) Category (See 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.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		wages
	Operation Children	Open districts (Office health are nown as 1000 miles)
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

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		
<u>_</u>	T-t-1	T	_
1	Total pages Schedule F1: Sch: 3/37 Rpt: 29/63	2 FILER NAME Johnson, Jarvis (The Honorable) 3 Filer ID (Ethics Commission Filers) 00080580	
	<u> </u>		_
4	Date	5 Payee name	
L	04/01/2024	Bankable Equity	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,200.00	2425 West Loop South	
		Houston, TX 77027	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	-
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		campaign office rent	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	H	
	Date	Payee name	=
	04/10/2024	Boost Mobile	
	Amount (\$)	Payee address; City; State; Zip Code	-
	\$625.00	3506 Chimney Rock Rd	
		Houston, TX 77056	
\vdash	PURPOSE		_
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		phonebanking phones	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	H	
H	Date	Payee name	Ħ
	04/10/2024	Boost Mobile	
	Amount (\$)	Payee address; City; State; Zip Code	۲
	\$43.30	3506 Chimney Rock Rd	
	ψ+0.30	Similar Rock Ru	
		Houston TV 770F6	
		Houston, TX 77056	_
	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	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		phone bill	
	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 - Event Expense Fees Food/Beverage Expense Git/Jawards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment		mittee I	Legal Services	·		/ages	/Contract Labor		OTHER (enter	a category not listed a	above)
	ordan dara r aymoni			The Instruction G	uide explains	how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 4/37 Rpt: 30/63		Johnson, Ja	rvis (The Hono	rable)					00080580		
4	Date	5	Payee name									
	04/18/2024		Boost Mobile	е								
6	Amount (\$)	7	Payee addres	s; City;	State;	; Zip Co	de					
	\$800.00	;	3506 Chimn	ey Rock Rd								
			Houston, TX	77056								
8	PURPOSE	(a) (Category (Se	e Categories listed at	the top of this sch	iedule)	(b)	Description				
	OF EXPENDITURE		phone exper			ŕ		Check if travel of	outsi	de of Texas. Cor	mplete Schedule T.	
	EXPENDITORE							_		officeholder livin	ng expense	
								phones for ph	non	ebanking		
9	Complete ONLY if direct expenditure to benefit C/OH		andidate/Offic	eholder name	(Office sou	ght			Office h	neld	
	experience to benefit of or											
	Date		Payee name									
	04/23/2024		Browning, H	arolyn								
	Amount (\$)		Payee addres	s; City;	State:	; Zip Co	de					
	\$318.00	-	7727 Ellis Dı	rive								
			Missouri City	y, TX 77489								
	PURPOSE	(a) (Category (Se	e Categories listed at	the top of this sch	iedule)	(b)	Description				
	OF EXPENDITURE			ges/Contract L				=			mplete Schedule T.	
								ш	, TX,	officeholder livin	ng expense	
								wages				
	Complete ONL V if direct		andidata/Offic	ahaldar nama		Office cou	abt			Office h	old	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		anuluale/Onic	ceholder name	(Office sou	gnı			Office h	ieiu	
		_										
	Date	l	Payee name									
	04/08/2024	'	Burrell, Krist	ina								
	Amount (\$)	l	Payee addres		State	; Zip Co	de					
	\$1,200.00	:	1916 West 0	Gray Street								
			Houston, TX	77019								
	PURPOSE	(a) (Category (Se	e Categories listed at	the top of this sch	iedule)	(b)	Description				
	OF EXPENDITURE	;	Salaries/Wa	ges/Contract L	abor			<u></u>			mplete Schedule T.	
								_	, TX,	officeholder livin	ng expense	
								wages				
_	Complete ONLY if direct	<u> </u>	andidata/Offic	oholdor nama		Office acre	abt			Office	oold	
	Complete ONLY if direct expenditure to benefit C/O		anuluate/Offic	ceholder name	(Office sou	ynı			Office h	leid	

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/37 Rpt: 31/63	Johnson, Jarvis (The Honorable) 00080580
4	Date	5 Payee name
	04/01/2024	Caldwell, Katelyn
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$450.00	3737 Watonga Blvd
		#10
		Houston, TX 77091
8	PURPOSE	
Ü	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		wages
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	04/18/2024	Caldwell, Katelyn
	Amount (\$)	Payee address; City; State; Zip Code
	\$550.00	3737 Watonga Blvd
		#10
		Houston, TX 77091
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		wages
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientare to benefit G/OI	<u>'</u>
	Date	Payee name
	04/02/2024	Canva
	Amount (\$)	Payee address; City; State; Zip Code
	\$14.99	75 East Santa Clara Street
		San Jose, CA 95113
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		graphic design software
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiulture to beliefit C/OI	1

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 Cabadula F1:	<u> </u>	ore)
1	Total pages Schedule F1: Sch: 6/37 Rpt: 32/63	2 FILER NAME Johnson, Jarvis (The Honorable) 3 Filer ID (Ethics Commission File 00080580	E13)
4	Date	5 Payee name	
	03/29/2024	Capital One	
6	Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 1680 Capital One Drive	
		McLean, VA 22102	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		credit card payment	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
	Date	Payee name	
	04/24/2024	Capital One	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	1680 Capital One Drive	
		McLean, VA 22102	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		credit card payment for senior event decorations	s
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	04/19/2024	CenterPoint Energy	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$31.60	P.O. Box 4567	
		Houston, TX 77210	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense utilities expense	
		dunites expense	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		

SCHEDULE F1

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 Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Credit Card F dyment	The Instruction Guide explains how to co	omplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 7/37 Rpt: 33/63	Johnson, Jarvis (The Honorable)		00080580	
4 Date	5 Payee name		•	
04/11/2024	Central Market			
6 Amount (\$)	7 Payee address; City; State; Zip C	ode		
\$22.69	3815 Westheimer Rd			
	Houston, TX 77027			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Food/Beverage Expense		avel outside of Texas. Com	
EXI ENDITORE			ustin, TX, officeholder living	expense
		staff lunch		
9 Complete ONLY if direct	Candidate/Officeholder name Office and	l cobt	Office be	ald.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office soi H	ugnı	Office he	eiu
Date	Payee name			
04/17/2024	Central Market			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$60.73	3815 Westheimer Rd			
	Houston, TX 77027			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Food/Beverage Expense		avel outside of Texas. Com ustin, TX, officeholder living	
		staff lunch		Схрепас
Complete ONLY if direct	Candidate/Officeholder name Office so	<u>I</u> ught	Office he	eld
expenditure to benefit C/O				
Date	Payee name			
04/11/2024	Chester, Camelia			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$168.75	6719 Green Sage Drive			
,				
	Houston, TX 77064			
PURPOSE		(b) D		
OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if tra	avel outside of Texas. Com	plete Schedule T.
EXPENDITURE	Salaties/Wages/Contract Labor		ustin, TX, officeholder living	
		wages		
Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office he	eld
expenditure to benefit C/O	H 			

SCHEDULE F1

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

Printing Expense Salaries/Wages/Contract Labor

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: 8/37 Rpt: 34/63		Johnson, Jarvis (The Honorable)		00080580			
4	Date	5	Payee name		-			
	04/18/2024		Chester, Camelia					
6	Amount (\$)	7	Payee address; City; State; Zip Co	ode				
	\$180.00		6719 Green Sage Drive					
			Houston, TX 77064					
8	PURPOSE	(a	Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF	,	Salaries/Wages/Contract Labor	(-,	Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE				Check if Austin, TX, officeholder living expense			
					wages			
9	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Officeholder name Office sou	ught	Office held			
		_						
	Date		Payee name					
	04/03/2024		Chevron					
	Amount (\$)		Payee address; City; State; Zip Co	ode				
	\$46.53		6530 W 43rd St					
			Houston, TX 77091					
	PURPOSE	(a	Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE		Transportation Equipment & Related		Check if travel outside of Texas. Complete Schedule T.			
			Expense		Check if Austin, TX, officeholder living expense			
					gas			
_	Complete ONLY if direct	_	Candidate/Officeholder name Office so	ıaht	Office held			
	expenditure to benefit C/Ol		Sandidate/Onicendider name Onice 300	agrit	Cifice field			
H	Dete	_						
	Date 04/05/2024		Payee name Chevron					
		┞						
	Amount (\$)		Payee address; City; State; Zip Co	ode				
	\$48.00		6530 W 43rd St					
		L	Houston, TX 77091					
	PURPOSE OF	(a	Category (See Categories listed at the top of this schedule)	(b)	Description			
	EXPENDITURE		Transportation Equipment & Related		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
			Expense		gas			
H	Complete ONLY if direct		Candidate/Officeholder name Office sou	ught	Office held			
	expenditure to benefit C/O			_				
\vdash								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Expense Travel in Expense Travel Out

Wages/Contract Labor OTHER (6)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/37 Rpt: 35/63	Johnson, Jarvis (The Honorable) 00080580
4	Date	5 Payee name
	04/22/2024	Chevron
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$14.61	6530 W 43rd St
		Houston, TX 77091
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense gas
		gus
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	the state of the s
⊨	Date	Davida marea
		Payee name Chick-fil-A
L	04/05/2024	
	Amount (\$)	Payee address; City; State; Zip Code
	\$44.02	5015 Westheimer
		Houston, TX 77056
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense staff lunch
		Stan functi
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Data	
	Date	Payee name
	04/10/2024	Chick-fil-A
	Amount (\$)	Payee address; City; State; Zip Code
	\$80.98	5015 Westheimer
		Houston, TX 77056
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Staff lunch
		Stan functi
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
l	Sch: 10/37 Rpt: 36/63	Johnson, Jarvis (The Honorable) 00080580	
4	Date	5 Payee name	_
l	04/18/2024	Chick-fil-A	
6	Amount (\$) \$50.75	7 Payee address; City; State; Zip Code 5015 Westheimer	
		Houston, TX 77056	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff lunch	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
l	04/24/2024	Chick-fil-A	
	Amount (\$) \$47.71	Payee address; City; State; Zip Code 5015 Westheimer	
		Houston, TX 77056	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff lunch	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	_
Г	Date	Payee name	_
l	04/15/2024	Clear Channel	
	Amount (\$) \$10,210.34	Payee address; City; State; Zip Code 12852 Westheimer Rd	
		Houston, TX 77077	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense billboard advertising	_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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 Salaries (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
-	Sch: 11/37 Rpt: 37/63	Johnson, Jarvis (The Honorable)
4	Date	5 Payee name
	04/22/2024	Congregation Beth Israel
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$154.50	5600 N Braeswood Blvd
		Houston, TX 77096
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee
		Candidate/Officeholder/Political Committee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	04/24/2024	Congregation Beth Israel
	Amount (\$)	Payee address; City; State; Zip Code
	\$51.50	5600 N Braeswood Blvd
	402.00	Social Management and
		Houston, TX 77096
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		seder event ticket
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	н
	Date	Payee name
	04/08/2024	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$362.44	1601 Trapelo Rd Ste 329
		Waltham, MA 02451
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense enewsletter account
		Chewsietter decount
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/37 Rpt: 38/63	Johnson, Jarvis (The Honorable) 00080580
4	Date	5 Payee name
	04/05/2024	Costco
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$143.43	3836 Richmond Ave
		Houston, TX 77027
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense food expense for phonebankers
		lood expense for prioriesancers
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
_	Date	Payee name
	04/22/2024	Costco
	Amount (\$)	Payee address; City; State; Zip Code
	\$181.43	3836 Richmond Ave
	Ψ101.43	3030 Nichmond Ave
		Houston, TX 77027
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense food for staff
		100น 101 รเลา
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	04/24/2024	Facebook
	Amount (\$)	Payee address; City; State; Zip Code
	\$139.97	1 Hacker Way
	Ψ100.51	Triadkor way
		Menlo Park, CA 94025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense digital ads
		aigital aus
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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 Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 13/37 Rpt: 39/63	Johnson, Jarvis (The Honorable)	00080580
4	Date	5 Payee name	
	04/24/2024	Facebook	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$22.85	1 Hacker Way	
		Menlo Park, CA 94025	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense	outside of Texas. Complete Schedule T.
		Check if Austin,	, TX, officeholder living expense
		uigitai aus	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ľ	expenditure to benefit C/O		Office field
_	Date	Dove name	
	04/04/2024	Payee name FedEx Office	
	Amount (\$) \$22.00	Payee address; City; State; Zip Code	
	Φ22.00	10670 Northwest Fwy	
		H	
		Houston, TX 77092	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense
		printing exper	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	04/18/2024	FedEx Office	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$44.81	10670 Northwest Fwy	
		Houston, TX 77092	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		outside of Texas. Complete Schedule T.
	EXPENDITURE		, TX, officeholder living expense
		printing exper	nse
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
L	expenditure to benefit C/OI	1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Event Expense Fees Food/Beverage Expense

Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/37 Rpt: 40/63	Johnson, Jarvis (The Honorable) 00080580
4	Date	5 Payee name
	04/18/2024	FedEx Office
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$37.36	10670 Northwest Fwy
		Houston, TX 77092
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 expense
		printing expense
_	Complete ONL V if direct	Candidate/Officeholder name Office sought Office hold
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	04/18/2024	Foundation Blue Media
	Amount (\$)	Payee address; City; State; Zip Code
	\$9,809.30	57 Manchester Street
		Weymouth, MA 02190
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		digital advertising
		digital advolutioning
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	D .	
	Date	Payee name
	04/18/2024	Harrison, Adrienne
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,077.50	14202 Hammond Hills Court
		Houston, TX 77044
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		food expense for Senior event
	0 1 0 0 0 0 0 0	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Oriana.o to borioni O/Oi	

SCHEDULE F1

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 Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.			
1	Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Sch: 15/37 Rpt: 41/63	Johnson, Jarvis (The Honorable)			00080580	
4	Date	5 Payee name				
	04/22/2024	Harrison, Adrienne				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$306.00	14202 Hammond Hills Court				
		Houston, TX 77044				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description			
	OF EXPENDITURE	Food/Beverage Expense	Check if trave		side of Texas. Com	
	LAFLINDITORL		_		(, officeholder living	
			beverage ex	kper	nse for fundr	aiser
_	Complete ONLY if direct	Condidate/Officeholder name Office cought			Office by	- 1d
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought			Office he	eiu
_						
	Date	Payee name				
	04/12/2024	Harrison, Adrienne				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$2,000.00	14202 Hammond Hills Court				
		Houston, TX 77044				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b)	Description			
	EXPENDITURE	Food/Beverage Expense	ш		side of Texas. Com K, officeholder living	
			_		or senior eve	
	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office he	eld
	expenditure to benefit C/O	1				
	Date	Payee name				
	04/20/2024	Hendry, Lavoshea				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$374.50	15322 Harris Canyon Lane				
		Cypress, TX 77429				
	PURPOSE		Description			
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if trave	el outs	side of Texas. Com	plete Schedule T.
	EXPENDITURE	Food/Develage Expense			(, officeholder living	
			Beverage e	xpei	nse for fundr	aiser
	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office he	eld
	expenditure to benefit C/O	1				

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services	Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:			LLX			3	Filer ID	(Ethics Commission Filers)	
	Sch: 16/37 Rpt: 42/63		Jarvis (The Honora	ble)				00080580		
4	Date	5 Payee nam	ie							
	04/01/2024	Hiett, Lila								
6	Amount (\$)	7 Payee add	ress; City;	State; Zip Co	ode					
	\$2,000.00	5518 Grai	ndwood Ln							
		Katy, TX	77450							
8	PURPOSE	(a) Category	(See Categories listed at the	top of this schedule)	(b)	Description				_
	OF EXPENDITURE		Vages/Contract Lab			Check if travel	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITORE					Check if Austin	, TX,	officeholder living	j expense	
						wages				
9	Complete ONLY if direct expenditure to benefit C/OI		fficeholder name	Office sou	ight			Office he	eld	
	Date	Payee nam	ie							
	04/11/2024	Hobbs, W	anda							
	Amount (\$)	Payee add	ress; City;	State; Zip Co	ode					
	\$180.00	16741 Ro	ck West Drive							
		Houston,	TX 77073							
	PURPOSE	(a) Category	(See Categories listed at the	top of this schedule)	(b)	Description				_
	OF EXPENDITURE		Vages/Contract Lab					de of Texas. Com		
	LAI LINDITORE					ш	, TX,	officeholder living	j expense	
						wages				
	Opening the ONITY if allowed	0 11 - 1 - + - 10	eria a la alla la como a	0#:				04:	-1.4	_
	Complete ONLY if direct expenditure to benefit C/OI		fficeholder name	Office sou	ignt			Office he	eia	
										_
	Date	Payee nam								
	04/18/2024	Hobbs, W	anda ———————————————————————————————————							
	Amount (\$)	Payee add	ress; City;	State; Zip Co	ode					
	\$240.00	16741 Ro	ck West Drive							
		Houston,	TX 77073							
	PURPOSE	(a) Category	(See Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE	Salaries/V	Vages/Contract Lab	or		ш		de of Texas. Com		
						ш	, TX,	officeholder living	j expense	
						wages				
	Complete ONLY if direct	Candidata/O	fficeholder name	Office sou	labt			Office he	ald	4
	Complete ONLY if direct expenditure to benefit C/OI		micentituei Haitle	Office Suc	igill			Office He	ะiu	
										4

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations made By - Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services	·		ies/Wages/Contract Labor OTHER (enter a category not listed ab					oove)
		The Instructi	on Guide explains h	ow to com	nple	te this form.					
1	Total pages Schedule F1:	2 FILE	R NAME					3	Filer ID	(Ethics Commiss	ion Filers)
	Sch: 17/37 Rpt: 43/63	John	son, Jarvis (The H	onorable)					00080580		
4	Date	5 Paye	e name								
	04/08/2024	ı	e Depot								
6	Amount (\$)	7 Paye	e address; City;	State;	Zip Cod	le					
	\$28.05	2455	Paces Ferry Rd. I	Nw							
		Atlar	nta, GA 30339								
8	PURPOSE	(a) Cate	Oory (See Categories list	ed at the top of this sche	dule) ((b)	Description				
	OF EXPENDITURE	ı	ertising Expense				Check if travel of	outsi	de of Texas. Com	plete Schedule T.	
	LXI LINDITORL						—		officeholder living	g expense	
							sign materials	S			
9	Complete ONLY if direct		late/Officeholder nan	ne Of	ffice soug	ht			Office he	eld	
	expenditure to benefit C/OI	П									
	Date	Paye	e name								
	04/11/2024	Hom	e Depot								
	Amount (\$)	Paye	e address; City;	State;	Zip Cod	le					
	\$26.97	2455	Paces Ferry Rd. I	٧w							
			-								
		 Δtlan	nta, GA 30339								
	DUDDOCE				1,	/I= \					
	PURPOSE OF	ı	Ory (See Categories list	ed at the top of this sche	dule)	(U)	Description Check if travel (nutei	de of Teyas Com	plete Schedule T.	
	EXPENDITURE	Aave	ertising Expense				=		officeholder living		
							ப sign materials		`		
							· ·				
	Complete ONLY if direct	<u>I</u> Candic	late/Officeholder nan	ne Of	ffice soug	ht			Office he	eld	
	expenditure to benefit C/OI				.						
-	Data										
	Date	1 1	e name blo Aroo Domooro	to							
	04/03/2024	Hulli	ble Area Democra								
	Amount (\$)	1 1	e address; City;	State;	Zip Cod	le					
	\$20.00	PO E	30x 3863								
		Hum	ble, TX 77347								
	PURPOSE	(a) Cate	gory (See Categories list	ed at the top of this sche	dule) ((b)	Description				
	OF EXPENDITURE		ributions/Donation				ш			plete Schedule T.	
	LXI LINDITORL	Cano	didate/Officeholder	/Political Commit	ttee				officeholder living	gexpense	
							membership	due	es		
	Complete ONLY if direct expenditure to benefit C/OI		late/Officeholder nan	ne Of	ffice soug	ht			Office he	eld	
L	experiorare to benefit C/OI										
1											

SCHEDULE F1

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

Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 18/37 Rpt: 44/63	Johnson, Jarvis (The Honorable) 00080580
4	Date	5 Payee name
	04/23/2024	JG Media
6	Amount (\$) \$1,550.00	7 Payee address; City; State; Zip Code 16225 Impact Way Pflugerville, TX 78660
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense advertising expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/10/2024	Jewish Herald-Voice
	Amount (\$) \$735.00	Payee address; City; State; Zip Code P.O. Box 153 Houston, TX 77001
	PURPOSE	
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense advertising expense
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/12/2024	Jewish Herald-Voice
	Amount (\$) \$460.00	Payee address; City; State; Zip Code P.O. Box 153
		Houston, TX 77001
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense advertising expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		s/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 19/37 Rpt: 45/63	Johnson, Jarvis (The Honorable)	00080580
4	Date	5 Payee name	
	04/11/2024	Judge, Tanya	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$260.00	4311 Bungalow Lane	
		Houston, TX 77047	
8	PURPOSE	(a) Category (See 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.
			Check if Austin, TX, officeholder living expense
			wages
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	04/18/2024	Judge, Tanya	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$450.00	4311 Bungalow Lane	
		Houston, TX 77047	
	PURPOSE	(a) Category (See 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.
			Check if Austin, TX, officeholder living expense wages
			wages
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	04/15/2024	King Dollar	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$33.87	9378 Richmond Ave	
		Houston, TX 77063	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Senior event decorations
			252. 3.3 4555.485
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		

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

	Candidate/Officeholder/Politica Credit Card Payment	l 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: 20/37 Rpt: 46/63	Johnson, Jarvis (The Honorable) 00080580
4	Date	5 Payee name
	04/01/2024	Kroger Fuel
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$52.44	1352 W 43rd St
		Houston, TX 77018
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T. Expense Check if Austin, TX, officeholder living expense
		Expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
⊨	Data	
	Date	Payee name
L	04/04/2024	Kroger Fuel
	Amount (\$)	Payee address; City; State; Zip Code
	\$93.27	1352 W 43rd St
		Houston, TX 77018
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment & Related
	LXI LINDITORL	Expense Check if Austin, TX, officeholder living expense
		gas
L	0 1: 0 1: 0	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	04/11/2024	Kroger's
	Amount (\$)	Payee address; City; State; Zip Code
	\$46.25	1352 W 43rd S
		Houston, TX 77018
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		food expense
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experience to beliefft C/OI	·

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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 Salaries/Wages/Contract Labor

	Credit Card Payment		The Instruction Guide explains ho	w to cor	npl	ete this form.
1	Total pages Schedule F1:	2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 21/37 Rpt: 47/63	,	Johnson, Jarvis (The Honorable)			00080580
4	Date	5	Payee name			-
	04/16/2024		Kroger's			
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de	
	\$112.54	ı	1352 W 43rd S			
			Houston, TX 77018			
8	PURPOSE	\vdash			(h)	Description
ľ	OF		Category (See Categories listed at the top of this schedule Event Expense	ule)	(D)	Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	'	Event Expense			Check if Austin, TX, officeholder living expense
l						decorations for senior event
l						
9	Complete ONLY if direct		andidate/Officeholder name Off	ice souç	ght	Office held
l	expenditure to benefit C/O	Н				
Г	Date		Payee name			
l	04/11/2024		LeBlanc, Taylor			
H	Amount (\$)		Payee address; City; State;	Zip Cod	de	
l	\$120.00	ı	4311 Bungalow Lane			
l			Ğ			
l			Houston, TX 77047			
⊢	PURPOSE	┝		[(h)	Description
l	OF		Category (See Categories listed at the top of this schedule Salaries/Wages/Contract Labor	ule)	(2)	Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE		odianes/ wages/ contract Labor			Check if Austin, TX, officeholder living expense
l						wages
L						
l	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeholder name Off	ice souç	ght	Office held
L	experioratione to benefit C/O	' '				
	Date		Payee name			
l	04/18/2024		LeBlanc, Taylor			
Г	Amount (\$)		Payee address; City; State;	Zip Co	de	
l	\$225.00	-	4311 Bungalow Lane			
l						
l			Houston, TX 77047			
H	PURPOSE	(a)	Category (See Categories listed at the top of this schedu	ule)	(b)	Description
l	OF EXPENDITURE		Salaries/Wages/Contract Labor	,		Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE					Check if Austin, TX, officeholder living expense
						wages
L	Operation ONE V. C.	Ļ	and data (Office hadden)		ala i	061-1-
	Complete ONLY if direct expenditure to benefit C/Ol		andidate/Officeholder name Off	ice souç	gnt	Office held
L						

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Ļ		· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1: Sch: 22/37 Rpt: 48/63	2 FILER NAME Johnson, Jarvis (The Honorable) 3 Filer ID (Ethics Commission Filers) 00080580
4	Date	5 Payee name
Ĺ	04/01/2024	Levine, Burt
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$800.00	9600 Glenfield Court
		Houston, TX 77096
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LAFLINDITORE	Check if Austin, TX, officeholder living expense
		wages
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiorale to belieff C/OI	1
	Date	Payee name
	04/11/2024	McCray, Cecelia
	Amount (\$)	Payee address; City; State; Zip Code
	\$180.00	16354 Ella blvd
		Houston, TX 77090
	PURPOSE	(a) Category (See 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. Check if Austin TX officeholder living expense.
		Check if Austin, TX, officeholder living expense Wages
		wages
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	04/18/2024	McCray, Cecelia
	Amount (\$)	Payee address; City; State; Zip Code
	\$240.00	16354 Ella blvd
		Houston, TX 77090
	PURPOSE	(a) Category (See 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.
		Check if Austin, TX, officeholder living expense Wages
		wayes
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	

SCHEDULE F1

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Sift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to co	omple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 23/37 Rpt: 49/63	Johnson, Jarvis (The Honorable)		00080580
4	Date	5 Payee name		•
	04/16/2024	McGee, Gerry		
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode	
	\$465.00	13419 Candleshade lane		
		Houston, TX 77045		
8	PURPOSE	(a) Category (See 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.
	LAI LINDITORE			Check if Austin, TX, officeholder living expense
				wages
_	Complete ONLY if direct	Condidate/Officeholder name	, au la t	Office hold
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ugnt	Office held
	Data			
	Date	Payee name		
	04/23/2024	McGee, Gerry		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$425.00	13419 Candleshade lane		
		Houston, TX 77045		
	PURPOSE	(a) Category (See 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.
	-			Check if Austin, TX, officeholder living expense
				wages
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ıaht	Office held
	expenditure to benefit C/OI		agiit	Cilide Held
	Date	Davise name		
	04/15/2024	Payee name Meyerland Democratic Club		
		•	1 -	
	Amount (\$)	Payee address; City; State; Zip Ci	oue	
	\$1,572.42	PO Box 310001		
		11 TV 77004		
		Houston, TX 77231		
	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
				April 2024 meeting sponsor
				· · · · · · · · · · · · · · · · · · ·
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ught	Office held
	expenditure to benefit C/OI		•	
_				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 24/37 Rpt: 50/63	2 FILER NAME Johnson, Jarvis (The Honorable) 3 Filer ID (Ethics Commission Filers) 00080580
4	Date 04/09/2024	5 Payee name NY Deli
6	Amount (\$) \$78.38	7 Payee address; City; State; Zip Code 9720 Hillcroft St
		Houston, TX 77096
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense lunch
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 04/22/2024	Payee name NY Deli
	Amount (\$) \$48.32	Payee address; City; State; Zip Code 9720 Hillcroft St
		Houston, TX 77096
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff lunch
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 04/11/2024	Payee name Nauls, Cynthia
	Amount (\$) \$180.00	Payee address; City; State; Zip Code 6401 Dehl Road
		Houston, TX 77092
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense wages
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 25/37 Rpt: 51/63	Johnson, Jarvis (The Honorable) 00080580
4	Date	5 Payee name
	04/18/2024	Nauls, Cynthia
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$180.00	6401 Dehl Road
		Houston, TX 77092
8	PURPOSE	(a) Category (See 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. Check if Austin, TX, officeholder living expense
		wages
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	'
	Date	Payee name
	04/11/2024	Nauls, Gregory
	Amount (\$)	Payee address; City; State; Zip Code
	\$180.00	6401 Dehl Road
		Houston, TX 77092
	PURPOSE	(a) Category (See 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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		wages
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y
	Date	Payee name
	04/18/2024	Nauls, Gregory
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	6401 Dehl Road
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		Houston, TX 77092
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		wages
	0 1: 0::::::	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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 Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment		The Instruction Guide explains how to complet	e this form.			
1	Total pages Schedule F1:	2	FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Sch: 26/37 Rpt: 52/63		Johnson, Jarvis (The Honorable)			00080580	
4	Date	5	Payee name				
	04/03/2024		Oak Forest Dems				
6	Amount (\$)	7	Payee address; City; State; Zip Code				
	\$20.00		1951 W TC Jester Blvd				
			Houston, TX 77008				
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule) (b)	Description			
	OF EXPENDITURE		Contributions/Donations Made By				plete Schedule T.
			Candidate/Officeholder/Political Committee [^{Check if Austin,} membership (officeholder living	expense
				membership (Juc	3	
9	Complete ONLY if direct		Candidate/Officeholder name Office sought			Office he	eld .
	expenditure to benefit C/OI		Zanandato, emissi siasi. mame			J55 116	
_	Date	Т	Payee name				
	04/10/2024		Office Depot				
_	Amount (\$)	┢	Payee address; City; State; Zip Code				
	\$114.90		5134 Richmond Ave.				
	411 1.00		ozo i i tionimona / tvo.				
			Houston, TX 77056				
	PURPOSE	(0)		D			
	OF	(a)	Category (See Categories listed at the top of this schedule) Supplies	Description Check if travel of	outsid	le of Texas. Com	plete Schedule T.
	EXPENDITURE		supplies			officeholder living	
				office supplies	S		
	Complete ONLY if direct		Candidate/Officeholder name Office sought			Office he	eld
	expenditure to benefit C/OI	П					
	Date		Payee name				
	04/11/2024		Office Depot				
	Amount (\$)		Payee address; City; State; Zip Code				
	\$96.73		5134 Richmond Ave.				
			Houston, TX 77056				
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule) (b) I	Description			
	OF EXPENDITURE		supplies				plete Schedule T.
				Check if Austin, Office supplies		officeholder living	expense
			'	onice supplies	5		
_	Complete ONLY if direct	Ц,	Candidate/Officeholder name Office sought			Office he	ald
	expenditure to benefit C/O		Chica sought			Onice He	JIU.
l							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

ng Expense Event Expense Loan Repayment/Reimbu

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 Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comp	plete	e this form.		
1	Total pages Schedule F1:	2 FILER NAME		3 F	iler ID	(Ethics Commission Filers)
	Sch: 27/37 Rpt: 53/63	Johnson, Jarvis (The Honorable)			00080580	
4	Date	5 Payee name		•		
	04/22/2024	Pappas Son Donuts				
6	Amount (\$)	7 Payee address; City; State; Zip Code	е			
	\$25.26	5127 Ella Blvd				
		Houston, TX 77018				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	b) [Description		
	OF EXPENDITURE	Food/Beverage Expense	Ę	Check if travel outside		
			L	Check if Austin, TX, of taff breakfast	illiceriolder living	expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	ht		Office he	eld
	expenditure to benefit C/OI					
_	Date	Payee name				
	04/15/2024	Pizzahut				
	Amount (\$)	Payee address; City; State; Zip Code	е.			
	\$78.86	4001 Richmond Ave	•			
	4.0.00	1002 1.101.11101.1127.110				
		Houston, TX 77027				
	PURPOSE		b) г	Description		
	OF	Food/Beverage Expense	-, Γ	Check if travel outside	e of Texas. Com	plete Schedule T.
	EXPENDITURE	- coange in process	Ī	Check if Austin, TX, o	fficeholder living	expense
			f	ood expense		
	2 2					
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	nt		Office he	eld
	Date	Payee name				
	04/18/2024	Pizzahut				
	Amount (\$)	Payee address; City; State; Zip Code	е			
	\$56.23	4001 Richmond Ave				
		Houston, TX 77027				
	PURPOSE OF	, , ,	b) [Description	of Tayon Com	plata Cabadula T
	EXPENDITURE	Food/Beverage Expense	F	Check if travel outside Check if Austin, TX, o		
			S	ataff dinner	3	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	ht		Office he	eld
	expenditure to benefit C/OI	1				

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	d 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: 28/37 Rpt: 54/63	Johnson, Jarvis (The Honorable) 00080580
4	Date	5 Payee name
	04/08/2024	Prime Grill & Bar
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,554.42	5621 Beechnut St
		Houston, TX 77096
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense event expense
		event expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
F	Date	Payee name
	04/01/2024	Pronin, Art
H	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	5250 Willowbend
		Houston, TX 77096
	PURPOSE	(a) Category (See 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.
		Check if Austin, TX, officeholder living expense Wages
		inages in ages
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	04/01/2024	Rimal, Karrol
H	Amount (\$)	Payee address; City; State; Zip Code
	\$900.00	1711 Perez St
		Austin, TX 78721
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		wages
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		
l		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 29/37 Rpt: 55/63	Johnson, Jarvis (The Honorable) 00080580
4	Date	5 Payee name
	04/01/2024	Rue, Markus
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	1604 Benson
		Houston, TX 77020
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		wages
_		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/16/2024	Ruiz, Christian
	Amount (\$)	Payee address; City; State; Zip Code
	\$175.00	22921 Imperial Valley Drive
		Houston, TX 77073
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		wages
	Complete ONLY if direct	Candidata/Officeholder name Office country Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/23/2024	Ruiz, Christian
	Amount (\$)	Payee address; City; State; Zip Code
	\$325.00	22921 Imperial Valley Drive
		Houston, TX 77073
	PURPOSE	(a) Category (See 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.
		Check if Austin, TX, officeholder living expense
		wages
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/V The Instruction Guide explains how to co		os/Contract Labor OTHER (enter a category not listed above) lete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 30/37 Rpt: 56/63	Johnson, Jarvis (The Honorable)		00080580
4	Date	5 Payee name		
	04/16/2024	Salitre, Vaneisha		
6	Amount (\$) \$205.00	7 Payee address; City; State; Zip Co 5451 Fulton St Houston, TX 77009	ode	
8	PURPOSE	(a) Category (See 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. Check if Austin, TX, officeholder living expense Wages
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sou H	ght	t Office held
	Date	Payee name		
	04/15/2024	Sam's Club		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$196.15	1615 S Loop West		
		Houston, TX 77054		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)) Description
	OF EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE			Check if Austin, TX, officeholder living expense
				beverages for senior event
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	t Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	04/15/2024	Shell Oil		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$97.56	P.O. Box 2463		
		Houston, TX 77252		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Transportation Equipment & Related		Check if travel outside of Texas. Complete Schedule T.
		Expense		Check if Austin, TX, officeholder living expense gas
	Complete ONLY if direct	Candidate/Officeholder name Office sou	abt	t Office held
	expenditure to benefit C/OI		ıyııı	. Office field

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
	Sch: 31/37 Rpt: 57/63	Johnson, Jarvis (The Honorable) 00080580		
4	Date	5 Payee name		
	03/28/2024	Shipley's Donuts		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$32.86	5513 Richmond Ave		
		Houston, TX 77056		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		staff breakfast		
		Stati Frodutaci		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
3	expenditure to benefit C/O			
_	Data	T -		
	Date	Payee name		
	04/11/2024	Sprint2Print		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$3,022.88 8748 Clay Rd #300			
		Houston, TX 77080		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Printing Expense		
		Check if Austin, TX, officeholder living expense		
		printing expense		
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	Complete ONLY if direct expenditure to benefit C/O			
	·			
	Date	Payee name		
	04/23/2024	Sprint2Print		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$692.80	8748 Clay Rd #300		
		Houston, TX 77080		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Printing Expense		
		Check if Austin, TX, officeholder living expense		
		printing expense		
	Complete ONLY if direct	Condidate/Office helder no rec		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment						OTHER (enter a category not listed above)			
			The Instruction Guide ex	cplains how to co	mple	te this form.	_			
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commiss	sion Filers)
	Sch: 32/37 Rpt: 58/63	Johnson, J	arvis (The Honorable))				00080580		
4	Date	5 Payee name	;							
	04/22/2024	Squarespa	ce							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	de					
	\$19.19	Eight Clark	son Street							
		New York,	NY 10014							
8	PURPOSE		See Categories listed at the top o	f this schodulo)	(b)	Description				
	OF	Advertising		i tilis scriedule)	` '		outs	de of Texas. Com	plete Schedule T.	
	EXPENDITURE	, ta vortioning	ZAPONOO			Check if Austin	, TX	officeholder living	g expense	
						website doma	ain			
9	Complete ONLY if direct		ficeholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI	+								
	Date	Payee name)							
	04/11/2024	St-Julian, F	Reginald							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de					
	\$180.00	6456 Ella l	ee Lane							
		Houston, T	X 77057							
	PURPOSE		See Categories listed at the top o	f this sehedule)	(b)	Description				
	OF		ages/Contract Labor	i triis scriedule)	(- ,	_	outs	de of Texas. Com	plete Schedule T.	
	EXPENDITURE	Galaries, W	ages/contract Labor			Check if Austin	, TX	officeholder living	g expense	
						wages				
	Complete ONLY if direct		ficeholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI	H								
	Date	Payee name)							
	04/18/2024	St-Julian, F	Reginald							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de					
	\$240.00	6456 Ella L	ee Lane							
		Houston, T	X 77057							
_	PURPOSE			***	(h)	Description				
	OF		See Categories listed at the top o ages/Contract Labor	f this schedule)	(5)		outs	de of Texas. Com	plete Schedule T.	
	EXPENDITURE	Salaries/ W	ages/Contract Labor			=		officeholder living		
						wages				
	Complete ONLY if direct		ficeholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI	4								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Event Expense Fees Food/Beverage Expense

Gift/Awards/Memorials Expense

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

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 33/37 Rpt: 59/63	Johnson, Jarvis (The Honorable) 00080580
4 Date	5 Payee name
04/03/2024	Sweetgreen
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$95.56	1141 Uptown Park
	Houston, TX 77056
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Staff lunch
	Stail faileti
Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/22/2024	T-Mobile
Amount (\$)	Payee address; City; State; Zip Code
\$90.41	12920 SE 38th Street
	Bellevue, WA 98006
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	campaign phone
	Campaign phone
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
<u> </u>	
Date	Payee name
04/22/2024	Texting for Less
Amount (\$)	Payee address; City; State; Zip Code
\$1,842.77	354 State St #104,
	Hackensack, NJ 07601
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
	Check if Austin, TX, officeholder living expense
	text blasts
Operation Children	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
p = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 =	
1	

SCHEDULE F1

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 Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 34/37 Rpt: 60/63	Johnson, Jarvis (The Honorable)	00080580
4	Date	5 Payee name	
	04/22/2024	Texting for Less	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,863.33	354 State St #104,	
		Hackensack, NJ 07601	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	The vertical graph and a second secon	outside of Texas. Complete Schedule T.
		text blasts	n, TX, officeholder living expense
		tox blasts	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ľ	expenditure to benefit C/O		0.000 0.00
_	Date	Payee name	
	04/23/2024	Texting for Less	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,906.34	354 State St #104,	
	\$1,000.0 1	oo i Gualo et ii 10 ii,	
		Hackensack, NJ 07601	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin	n, TX, officeholder living expense
		text blasts	
	Operation ONLY if direct	Our distance (Office has believe as a second	Office health
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	04/16/2024	Trimiar, Kaisa	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$205.00	408 Eichwurzle Lane	
		Houston, TX 77009	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Jaianes/Wages/Contract Eabor	outside of Texas. Complete Schedule T. 1, TX, officeholder living expense
		wages	, TX, officeriolaer living expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 35/37 Rpt: 61/63	Johnson, Jarvis (The Honorable) 00080580						
4	Date	5 Payee name						
	03/28/2024	Uprinting						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$374.88	8000 Haskell Avenue						
	1							
		Van Nuys, CA 91406						
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 expense						
	!	printing expense						
<u> </u>	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH								
	Date	Payee name						
	04/22/2024	Urban One						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$5,470.00	1010 Wayne Ave						
	1	14th Floor						
	!	Silver Springs , MD 20910						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE		Advertising Expense						
	EXPLINDITORL	Check if Austin, TX, officeholder living expense						
		radio advertising expense						
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held						
_	- CAPCHARATO TO SOTION C.C.	<u> </u>						
	Date	Payee name						
	03/28/2024	VistaPrint						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$483.88	275 Wyman St						
	!							
		Waltham, MA 02451						
	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						
	1	printing expense						
	0 1: 0 1: 0							
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held						

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense 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: 36/37 Rpt: 62/63	Johnson, Jarvis (The Honorable) 00080580							
4	Date	· · · · · · · · · · · · · · · · · · ·							
ľ	04/13/2024	5 Payee name Watson, Chris							
Ļ									
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$705.52	914 Main St #2303							
		Houston, TX 77002							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Food/Beverage Expense							
	EXI ENDITORE	Check if Austin, TX, officeholder living expense							
		food expense							
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
	Date	Payee name							
	04/22/2024	Wing Quarter Daiquiris & Creole Kitchen							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$253.95	3929 Old Spanish Trl							
		Houston, TX 77021							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
EXPENDITURE		Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
		staff dinner							
		Stan diffici							
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/O								
	Date	Payee name							
	04/12/2024	Zenith Strategies							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$19,713.74	5401 Glendale St							
		Duluth, MN 55804							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.							
		Check if Austin, TX, officeholder living expense							
		mailer printing and postage							
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
	Superiorder to borront O/OI	•							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Committee	Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide	ense Printing Salaries	Expense Expense S/Wages/Contract Labor complete this form.	Т	ravel in District ravel Out of Dis DTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:					1	iler ID	(Ethics Commission Filers)
	Sch: 37/37 Rpt: 63/63	Johnson,	Jarvis (The Honorabl	e)		0	0080580	
4	Date	5 Payee nam						
	04/23/2024	Zenith Str	ategies					
6	Amount (\$)	7 Payee addr		State; Zip C	Code			
	\$17,763.93	5401 Gler	idale St					
		Duluth, MI	N 55804					
8	PURPOSE	(a) Category	(See Categories listed at the top					
	OF EXPENDITURE	Advertisin	g Expense			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
					mailer printi			expense
					The state of the s		a pootago	
9	Complete ONLY if direct expenditure to benefit C/Ol		fficeholder name	Office so	ought		Office he	ld