CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to com	plete this form.	1 Filer ID (Ethics Commi 00084543		2 Total pages f	ïled: 18
3 CANDIDATE /	MS / MRS / MR	FIRST	•	MI	OFFICE	USE ONLY
OFFICEHOLDER	Ms.	Angeanette				
NAME		3			Date Received	
					ELECTRONIC	ALLY FILED
	NICKNAME	LAST		SUFFIX	07/11/2024	
		Thibodeaux				
					Date Hand-delivered	or Dato Bostmarkod
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; AF	71/SUITE#; CII	Y,	ZIP CODE	Date Hand-delivered	of Date Postillarked
MAILING	9597 Jones Road				Receipt #	Amount
ADDRESS	Box 161				Receipt #	Amount
Change of Address	Houston, TX 77065				Data Decession	
					Date Processed	
					D () ()	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER				IVII		
NAME		Trina				
	NICKNAME	LAST		SUFFIX		
		Williams				
6 CAMPAIGN	STREET ADDRESS (NO F	O BOX PLEASE);	AP'	T / SUITE #; CITY;	ST	ATE; ZIP CODE
TREASURER	900 Winston #200					
ADDRESS						
(Residence or Business)						
	Houston, TX 77009					
7 CAMPAIGN	AREA CODE PHO	ONE NUMBER	EXTENSION			
TREASURER			EXTENSION			
PHONE	(832) 236-3822					
8 REPORT TYPE				D	1 45th days after a	
	January 15	30th day before	election	Runoff	appointment (off	ampaign treasurer ficeholder only)
	X July 15	8th day before	election	Exceeded modified	Final Report (Att	
				reporting limit]	
9 PERIOD	Month Day Yea	·		Month Day	Year	
COVERED	05/19/2024		HROUGH	06/30/2024		
	00/10/2024			00/00/202	•	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
IU ELECTION	Month Day Year		Primary		Other	
	Infortation Day Tea		minary	Kullon		
			Seneral	Special		
11 OFFICE	OFFICE HELD (if any)	•		12 OFFICE SOUGHT	(if known)	
		GO 1	TO PAGE 2			
Forms provided by Te	xas Ethics Commission	www.et	hics.state.tx.u	S	Vers	ion V4.1.0.d378aba0

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH **COVER SHEET PG 2** 2 of 18

13 C / OH NAME	Thibodeaux, Angean	ette (Ms.)	14 Filer ID (E 00084543	thics Commission Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditure These expenditures may have been made without to I officeholders are required to report this information	he candidate's or officel	older's knowledge or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	S		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 40.00	
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 15,040.00	
EXPENDITURE TOTALS					
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 13,391.42	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA RIOD	AST DAY OF THE	\$ 218.45	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS (TING PERIOD	OF THE LAST DAY	\$ 65,000.00	
17 AFFIDAVIT	•			•	
		I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.			
		Ms. Ang	eanette Thibodeaux		
		Signature of	Candidate or Officehold	er	
AFFIX NO	TARY STAMP / SEAL AB	DVE			
		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	
Forms provided by Te	exas Ethics Commission	www.ethics.state.tx.us	V	ersion V4.1.0.d378aba0	

S	UBT	OTALS - C/OH			FORM C/OH SHEET PG 3 3 of 18
	ER NAM	ΛΕ ux, Angeanette (Ms.)	19 Filer ID 00084543		ommission Filers)
		E SUBTOTALS SCHEDULE		SUE	STOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	7,540.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	7,500.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	13,391.42
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	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.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	299.05

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 4/18 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Thibodeaux, Angeanette (Ms.) 00084543 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 05/19/2024 Baptist Minister's Association of Houston & Vicinity \$5,000.00 6 Contributor address; City; State; Zip Code Houston, TX 77030 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/24/2024 \$1,500.00 Baptist Minister's Association of Houston & Vicinity Contributor address; City; State; Zip Code Houston, TX 77030 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$)) 05/23/2024 Houston Apartment Association PAC \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77041 Principal occupation / Job title (See Instructions) Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	iction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/1 Rpt: 5/18					
2 FILER NAME		3 Filer ID (Ethics Commission Filers)					
	, Angeanette (Ms.)	00084543					
	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$					
5 Date 05/25/2024	 6 Full name of contributor out-of-state PAC (ID#: D.E.C of Women 7 Contributor address; City; State; Zip Code)	8 Amount of 9 In-kind contribution contribution (\$) description \$4,000.00 1,000 campaign shirts donated				
	Houston, TX 77088		I 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)				
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	r's spouse (if any) (FOR JUDICIAL)				
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date 05/25/2024	Full name of contributor out-of-state PAC (ID#: IQ Consulting Contributor address; City; State; Zip Code)	Amount of contribution (\$) \$3,500.00 I Campaign furniture, moving and supplies				
	Houston, TX 77065		Check if travel outside of Texas. Complete Schedule T.				
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)						
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)					
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						

			EXPENDITURE C	ATEGOR	IES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Inting/Banking Fees Office Overhead/Rental Expense Jiting Expense Food/Beverage Expense Polling Expense butions/ Donations Made By - Gitl/Awards/Memorials Expense Printing Expense indidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor			Travel in District Travel Out of Dis	quipment & Related Expense			
1	Total pages Schedule F1:	FILER NAME	Ξ				3	Filer ID	(Ethics Commission Filers)
	Sch: 1/12 Rpt: 6/18	Thibodeaux	k, Angeanette (Ms.)	1				00084543	
4	Date	Payee name					I		
	05/28/2024	Amazon							
6	Amount (\$)	Payee addre	ss; City;	State;	Zip Coc	e			
	\$19.36	410 Terry A	ve N						
			00100						
		Seattle, WA							
8	PURPOSE OF		ee Categories listed at the to		edule)	b) Description	outoi	do of Toyon, Com	plata Sabadula T
	EXPENDITURE	Office Over	head/Rental Expen	ise				de of Texas. Com officeholder living	
						Office Suppli			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Off	iceholder name	O	ffice soug	ht		Office he	eld
	Date	Payee name							
	05/28/2024	Amazon							
	Amount (\$)	Payee addre	ss; City;	State;	Zip Coc	e			
	\$40.93	410 Terry A	ve N						
		Seattle, WA	A 98109						
	PURPOSE OF		ee Categories listed at the to		edule)	b) Description			
	EXPENDITURE	Office Over	head/Rental Expen	ise				de of Texas. Com officeholder living	
						Office Suppli			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Off	iceholder name	0	ffice soug	ht		Office he	eld
	Date	Payee name							
	05/28/2024	Amazon							
	Amount (\$)	Payee addre		State;	Zip Coo	e			
	\$68.74	410 Terry A	AVE N						
		Seattle, WA	A 98109						
	PURPOSE OF		ee Categories listed at the to		edule)	b) Description			
	EXPENDITURE	Office Over	head/Rental Expen	ise				de of Texas. Com officeholder living	
						Office Suppli		oncentrater inving	j expense
-	Complete ONLY if direct	Candidate/Off	iceholder name	0	ffice soug	ht		Office he	eld
	expenditure to benefit C/OI				Ū				

		EXPENDITURE CATEGORIES FOR BOX 8(a)		
		ccounting/Banking Fees Office Overhead/Rental Expense ionsulting Expense Food/Beverage Expense Polling Expense iontributions/Donations Made By - Gitt/Awards/Memorials Expense Printing Expense Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor		
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)	
	Sch: 2/12 Rpt: 7/18	Thibodeaux, Angeanette (Ms.)	00084543	
4	Date	Payee name		
	05/22/2024	Amazon		
6	Amount (\$)	Payee address; City; State; Zip Code		
	\$94.00	410 Terry Ave N		
		Seattle, WA 98109		
8	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	
		Office Supplie		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held	
	Date	Payee name		
	05/20/2024	Amazon		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$69.27	410 Terry Ave N		
		Seattle, WA 98109		
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense 2S	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held	
	Date	Payee name		
	05/20/2024	Amazon		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$54.19	410 Terry Ave N		
		Seattle, WA 98109		
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense BS	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held	

		EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 3/12 Rpt: 8/18	Thibodeaux, Angeanette (Ms.)	00084543				
4	Date 05/20/2024	Payee name Amazon					
0	Amount (\$) \$24.86	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109					
8	PURPOSE	b) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Office Overhead/Rental Expense					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	05/28/2024	Bon Bon					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$43.87	14222 Bammel North Houston Rd Houston, TX 77014					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense UnteerS				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	05/20/2024	Bon Bon					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$15.86	14222 Bammel North Houston Rd					
		Houston, TX 77014					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. h, TX, officeholder living expense unteers				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 4/12 Rpt: 9/18	Thibodeaux, Angeanette (Ms.)	00084543
4	Date 06/03/2024	5 Payee name Cardona, James	
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 5216 Leeland St. Houston, TX 77023	
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/28/2024	Cardona, James	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,000.00	5216 Leeland St. Houston, TX 77023	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/23/2024	Chevron	
	Amount (\$) \$50.00	Payee address; City; State; Zip Code 6001 Bollinger Canyon Road	
		San Ramon, CA 94583	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense I Truck
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 5/12 Rpt: 10/18	Thibodeaux, Angeanette (Ms.)	00084543
4	Date 05/21/2024	Payee name Chevron	
6	Amount (\$) \$50.00	 Payee address; City; State; Zip Code 6001 Bollinger Canyon Road San Ramon, CA 94583 	
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense I Truck
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/20/2024	Chevron	
	Amount (\$) \$50.00	Payee address; City; State; Zip Code 6001 Bollinger Canyon Road San Ramon, CA 94583	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense I Truck
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/28/2024	Enterprise Rent-A-Car	
	Amount (\$) \$222.52	Payee address;City;State;ZipCode600 Corporate Park Drive	
		Saint Louis, MO 63105	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense transportation
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

			EXPENDITURE CATEGO	ORIES FOR	R BC	DX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gitf/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	erhead pense xpens Vages	e /Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 6/12 Rpt: 11/18		Thibodeaux, Angeanette (Ms.)					00084543
4	Date	5	Payee name					
	05/24/2024		Enterprise Rent-A-Car					
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	de			
	\$96.01		600 Corporate Park Drive					
			Saint Louis, MO 63105					
8	PURPOSE	(a)	Category (See Categories listed at the top of this so	chedule)	(b)	Description		
	OF EXPENDITURE		Office Overhead/Rental Expense	,		Check if travel		ide of Texas. Complete Schedule T.
	EXPENDITORE							, officeholder living expense
						Voter Contac	t tra	ansportation
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ight			Office held
	Date		Payee name					
	05/21/2024		FEDEX					
	Amount (\$)	╞	Payee address; City; State	e; Zip Co	de			
	\$337.20		P.O. Box 371461	-, 1				
	\$001120							
			Pittsburgh, PA 15250-7461					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this so Office Overhead/Rental Expense	chedule)	(b)			ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght			Office held
	Date		Payee name					
	06/21/2024		Frost Bank					
	Amount (\$)			e; Zip Co	do			
	\$8.00		PO Box 1600	e, zip co	ue			
	Φ0.00		FO B0X 1000					
			San Antonio, TX 78296					
	PURPOSE	(a)	Category (See Categories listed at the top of this so	chedule)	(b)	Description	_	
	OF EXPENDITURE		Fees					ide of Texas. Complete Schedule T. , officeholder living expense
	Complete ONLV if direct	Ļ	Candidate/Officeholder name	Office sou	abt			Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF			Unice sou	iyill			Once new

		EXPENDITURE CATEGO	DRIES FOR BO	OX 8(a)
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain:	Office Overhead Polling Expense Printing Expense Salaries/Wages/	se Travel Out of District //Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)
	Sch: 7/12 Rpt: 12/18	hibodeaux, Angeanette (Ms.)		00084543
4	Date 05/20/2024	Payee name Home Depot		
6	Amount (\$) \$57.26	Payee address; City; Stat 159 Fm 1960 West Houston, TX 77068	e; Zip Code	
8	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this so Office Overhead/Rental Expense		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Yard sign supplies
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sought	Office held
	Date	Payee name		
	05/24/2024	aurel Oaks HOA		
	Amount (\$) \$960.00	Payee address; City; Stat 2075 Laurel Oaks Dr. Houston, TX 77014	e; Zip Code	
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this se		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sought	Office held
	Date	Payee name		
	06/04/2024	lichael Yarbough & Assoc.		
	Amount (\$) \$1,200.00	Payee address; City; Stat 616 Wayne	e; Zip Code	
		louston, TX 77026		
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this so Galaries/Wages/Contract Labor		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract labor
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	undidate/Officeholder name	Office sought	Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FIL	ER NAME				3	Filer ID (Ethics Commission File	rs)
	Sch: 8/12 Rpt: 13/18		bodeaux, Angeanette (Ms.)					00084543	-
4	Date 05/28/2024		ree name ∟AN O Supermarket						
6	Amount (\$) \$99.23	68	vee address; City; 06 W Montgomery Rd uston, TX 77091	State;	Zip Coo	le			
8	PURPOSE OF EXPENDITURE		egory (See Categories listed at the top ice Overhead/Rental Expen		edule)			ide of Texas. Complete Schedule T. , officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		lidate/Officeholder name	0	Office soug	ht		Office held	
	Date	Pay	vee name						
	05/28/2024	Qu	otes						
	Amount (\$) \$2,148.18	80	vee address; City; D2 Willowbrook Mall uston, TX 77070	State;	Zip Coo	le			
	PURPOSE OF EXPENDITURE		egory (See Categories listed at the top ent Expense	o of this sche	edule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense Event	
	Complete ONLY if direct expenditure to benefit C/OF		lidate/Officeholder name	0	Dffice soug	ht		Office held	
	Date	Pay	vee name						
	05/21/2024	Qu	otes						
	Amount (\$) \$801.56	-	vee address; City; 02 Willowbrook Mall	State;	Zip Coo	le			
		Но	uston, TX 77070						
	PURPOSE OF EXPENDITURE		egory (See Categories listed at the top ent Expense	o of this sche	edule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense Event	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		lidate/Officeholder name	0	Office soug	ht		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political G Credit Card Payment							Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 9/12 Rpt: 14/18		Thibodeaux, Angeanette (Ms	5.)				00084543		
4	Date	5	Payee name							
	05/20/2024		Reesh's Sweet Southern Tea	a						
6	Amount (\$)	7	Payee address; City;	State	; Zip Co	le				
	\$110.00		409 E 35th St							
			Houston, TX 77018							
_										
8	PURPOSE OF	(a)	Category (See Categories listed at the	e top of this sch	nedule)	(b) Description		ide of Tourse Operations Ophodula T		
	EXPENDITURE		Food/Beverage Expense					ide of Texas. Complete Schedule T.		
							Check if Austin, TX, officeholder living expense Refreshments for Team			
9	Complete ONLY if direct		Candidate/Officeholder name	() Dffice sou	ht		Office held		
	expenditure to benefit C/OI	H								
	Date		Payee name							
	05/30/2024		SAMS Club							
		┝		Stata	; Zip Co	10				
	Amount (\$)		Payee address; City;	Sidle,	, ZIP CO	ie				
	\$47.88		2101 SE Simple Savings Dr							
			Bentonville, AR 72712							
	PURPOSE	(a)	Category (See Categories listed at the	e top of this sch	nedule)	(b) Description				
	OF EXPENDITURE		Office Overhead/Rental Exp		,	Check if travel	outs	ide of Texas. Complete Schedule T.		
	EXPENDITORE							, officeholder living expense		
						Supplies				
	Complete ONLY if direct		Candidate/Officeholder name	C	Office sou	lht		Office held		
	expenditure to benefit C/OI									
	Date		Payee name							
	05/23/2024		SAMS Club							
	Amount (\$)		Payee address; City;	State	; Zip Co	le				
	\$237.42		2101 SE Simple Savings Dr		•					
	• -		J J-							
			Bentonville, AR 72712							
	PURPOSE	(a)	Category (See Categories listed at the	e top of this sch	nedule)	(b) Description				
	OF EXPENDITURE		Office Overhead/Rental Exp					ide of Texas. Complete Schedule T.		
	EXPENDITORE						n, TX	, officeholder living expense		
						Supplies				
		L								
	Complete ONLY if direct		Candidate/Officeholder name	(Office sou	Iht		Office held		
	expenditure to benefit C/OI	Н								

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mittee Legal Services The Instruction Guide explains	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)	
	Sch: 10/12 Rpt: 15/18		Thibodeaux, Angeanette (Ms.)				00084543	
4	Date 05/21/2024		Payee name SAMS Club					
6	Amount (\$) 7 Payee address; City; State; Zip Code \$307.37 2101 SE Simple Savings Dr Bentonville, AR 72712 Bentonville, AR 72712							
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Office Overhead/Rental Expense	iedule)			ide of Texas. Complete Schedule T. , officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ıht		Office held	
	Date		Payee name					
	05/24/2024	:	SMH Business Solutions					
	Amount (\$)		Payee address; City; State;	; Zip Co	le			
	\$500.00		13222 Bammel North Houston Road Houston, TX 77006					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Salaries/Wages/Contract Labor	iedule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	Jht		Office held	
	Date		Payee name					
	05/28/2024	:	SMH Business Solutions					
	Amount (\$) \$2,142.00		Payee address; City; State; 13222 Bammel North Houston Road	; Zip Co	le			
			Houston, TX 77006	r				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Salaries/Wages/Contract Labor	iedule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	Jht		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Overhead/Rental Expense T Food/Beverage Expense Polling Expense T - Gift/Awards/Memorials Expense Printing Expense				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 11/12 Rpt: 16/18		Thibodeaux, Angeanette (Ms.)					00084543		
4	Date	5	Payee name							
	06/12/2024		SMH Business Solutions							
6	Amount (\$)	7	Payee address; City; S	State; Zip	Code)				
	\$240.00		13222 Bammel North Houston Roa	ad						
			Houston, TX 77006							
8	PURPOSE	(a)	Category (See Categories listed at the top of th	nis schedule)	(b) Description				
	OF EXPENDITURE		Salaries/Wages/Contract Labor					ide of Texas. Complete Schedule T.		
						Contract lab		, officeholder living expense		
						Contract labo	ונ			
_	Complete ONLY if direct		Candidate/Officeholder name	Office		+		Office held		
9	expenditure to benefit C/OF		andidate/Onicenoider name	Office s	ougn	ll i		Onice nelu		
	Date		Payee name							
	05/28/2024		Shell							
	Amount (\$)		Payee address; City; S	State; Zip	Code	9				
	\$60.00		150 N Dairy Ashford Rd Ste A							
			,							
			Houston, TX 77002							
	PURPOSE	(a)	Category (See Categories listed at the top of th	nis schedule)	(b	Description				
	OF EXPENDITURE		Travel In District					ide of Texas. Complete Schedule T.		
						Fuel	1, IX,	, officeholder living expense		
						Fuei				
_	Complete ONLY if direct		Candidate/Officeholder name	Office s		+		Office held		
	expenditure to benefit C/OI		candidate/Oncentitider name	Onice s	ouyn	it.		Onice field		
_	Date		Payee name							
	05/28/2024		Shipley Donuts							
	Amount (\$)		· · ·	State; Zip	Code	<u>, </u>				
	\$23.08		8223 Jones Road	σιαιο, Ζιρ	Couc					
	φ20.00									
			Houston, TX 77065							
	PURPOSE	(a)	Category (See Categories listed at the top of th	nis schedule)	(b) Description				
	OF EXPENDITURE		Food/Beverage Expense					ide of Texas. Complete Schedule T.		
	EXPENDITORE							, officeholder living expense		
						Volunteer's r	nea	U		
	_									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office s	ough	t		Office held		
		•								

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Rep Fees Office Ov Food/Beverage Expense Polling E v - Gift/Awards/Memorials Expense Printina F	oayment/Reimbursement erhead/Rental Expense kpense xpense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1 Total pages Schedule F1:	2 FILER NAME	3	Filer ID (Ethics Commission Filers)				
Sch: 12/12 Rpt: 17/18	Thibodeaux, Angeanette (Ms.)		00084543				
4 Date	5 Pavee name						
05/20/2024	Taco Bell						
6 Amount (\$) \$32.63	7 Payee address; City; State; Zip Co 10 E Crosstimbers St	ode					
	Houston, TX 77002						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		ide of Texas. Complete Schedule T. , officeholder living expense I				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sou H	ıght	Office held				
Date	Payee name						
05/20/2024	USPS						
Amount (\$) \$680.00	Payee address; City; State; Zip Co 14403 Walters Rd. Houston, TX 77014-9998	ode					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		ide of Texas. Complete Schedule T. , officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sou H	ıght	Office held				

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instru	cti	. Total pages Schedule K: Sch: 1/1 Rpt: 18/18				
2	FILER NAME			:		D (Ethics Commissio	on Filers)
	Thibodeaux,	Ar	igeanette (Ms.)		00084	1543	
4	Date	5	Name of person from whom amount is received			8 Amount (\$)	
	05/31/2024		Enterprise Rent-A-Car				\$298.37
		6	Address of person from whom amount is received; City; State; Zip Code				
			Saint Louis, MO 63105				
		7	Purpose for which amount is received	Check if pol	itical conti	ribution returned to file	er
			Refund				
	Date		Name of person from whom amount is received			Amount (\$)	
	06/21/2024		Frost Bank				\$0.09
	-		Address of person from whom amount is received; City; State; Zip Code			1	
			San Antonio, TX 78296				
		┢		Check if pol	itical conti	I ribution returned to file	er
			Monthly interest				
\vdash	Date		Name of person from whom amount is received			Amount (\$)	
	05/20/2024		Frost Bank				\$0.59
	00/20/202					4	Ψ0.00
			Address of person from whom amount is received; City; State; Zip Code				
			San Antonio, TX 78296				
		┝		Check if pol	itical conti	I ribution returned to file	er
			Monthly interest				
⊢							