CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to compl	ete this form.	1 Filer ID (Ethics Commis 00082332	sion Filers)	2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	ISE ONLY
OFFICEHOLDER NAME	The Honorable	Jon E.			Date Received ELECTRONICA	LLY FILED
	NICKNAME	LAST Rosenthal		SUFFIX	07/14/2024	
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING ADDRESS	8624 Highway 6 N. #340				Receipt #	Amount
Change of Address	Houston, TX 77064				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	_ <u>-</u>	
TREASURER NAME	Mr.	Nirav P.				
	NICKNAME	LAST		SUFFIX		
		Sheth				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	APT	/ SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER ADDRESS	9200 Westheimer Rd. #18	11				
(Residence or Business)	Houston, TX 77063					
7 CAMPAIGN TREASURER PHONE	AREA CODE PHON (832) 282-6423	IE NUMBER E	EXTENSION			
8 REPORT TYPE	January 15	30th day before	election	Runoff	15th day after cam appointment (office	npaign treasurer eholder only)
	X July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Attac	ch C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2024	TH	IROUGH	06/30/202	<u>'</u> 4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	P	rimary	Runoff	Other	
	11/05/2024	XG	eneral	Special		
11 OFFICE	OFFICE HELD (if any)	•		12 OFFICE SOUGHT	(if known)	
	State Representative Distr	rict 135		State Represent	tative District 135	
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 48

13 C / OH NAME	Rosenthal, Jon E. (Th	e Honorable)	14 Filer ID (00082332	(Ethics Commission Filers)				
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political ex These expenditures may have been made w officeholders are required to report this info	vithout the candidate's or office	eholder's knowledge or				
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME						
	GENERAL							
		COMMITTEE ADDRESS						
	SPECIFIC							
		COMMITTEE CAMPAIGN TREASURER N	AME					
		COMMITTEE CAMPAIGN TREASURER A	DDRESS					
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHE ES OF LOANS, OR CONTRIBUTIONS MAD		\$ 0.00				
	LOANS)	\$ 21,544.50						
EXPENDITURE TOTALS								
	4. TOTAL POLITIC		\$ 23,085.11					
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF RIOD	THE LAST DAY OF THE	\$ 33,480.13				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOA TING PERIOD	NS AS OF THE LAST DAY	\$ 0.00				
17 AFFIDAVIT			penalty of perjury, that the accudes all information required to Code.					
		The	Honorable Jon E. Rosenth	nal				
		Signa	ature of Candidate or Officehol	der				
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	rtify which, witness my hand and seal of offi	ce.					
Signature of offi	Signature of officer administering Printed name of officer administering Title of officer administering oath							

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			C	OVER SHEET PG 3 3 of 48
	ER NAN	, Jon E. (The Honorable)	19 Filer ID 00082332	(Ethics Commission Filers)
l		E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 20,794.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 750.50
3.		\$		
4.		SCHEDULE E: LOANS		\$
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$ 23,085.11
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	NS	\$
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 C	F C/OH	\$
11	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	NS	\$
12	. 🗆	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS R TO FILER	ETURNED	\$

	MONET	ARY POLITICAL CONTRIBUTIO	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/24 Rpt: 4/48	
2	FILER NAME Rosenthal, J	lon E. (The Honorable)		3	Filer ID (Ethics Commission 00082332	on Filers)
4	Date 01/18/2024	5 Full name of contributor out-of-state PAC (ID#:_Ahmadi, Anahita 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$50.00
0	Dringing oggu	Cypress, TX 77429 pation / Job title (See Instructions)	9 Employer (See Instructions			
8	S. Project M	i i i i i i i i i i i i i i i i i i i	Daikin Comfort)		
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_Allen Boone Humphries Robinson Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Houston, TX 77027 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/26/2024	Full name of contributor out-of-state PAC (ID#:_ Ballard, Brooks Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu	Houston, TX 77040 pation / Job title (See Instructions)	Employer (See Instructions			
	Texas Broke	· · · · · · · · · · · · · · · · · · ·	Engel & Völkers	,		
	Date 06/06/2024	Full name of contributor out-of-state PAC (ID#:_Black, Kate Contributor address; City; State; Zip Code Houston, TX 77008)		Amount of Contribution (\$)	\$36.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions DRTx)		
	Date 01/20/2024	Full name of contributor out-of-state PAC (ID#:_Black, Mayra Contributor address; City; State; Zip Code Houston, TX 77095)		Amount of Contribution (\$)	\$25.00
	Principal occu HSE Special	pation / Job title (See Instructions)	Employer (See Instructions Forum Energy Technolo		28	

	MONET	ARY POLITICAL CONTRIBU	JTION	IS .		SCHEDUI	E A1
	The Instruc	ction Guide explains how to complete t	this for	n.	1	Total pages Schedule A1: Sch: 2/24 Rpt: 5/48	
2	FILER NAME Rosenthal, J	on E. (The Honorable)			3	Filer ID (Ethics Commission 00082332	on Filers)
4	Date 05/15/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$25.00
8	Principal occu Not Employe	Houston, TX 77005 pation / Job title (See Instructions)	9	Employer (See Instructions Not Employed	<u> </u> s)		
	Date 06/03/2024	Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$500.00
	Principal occu Attorney	Houston, TX 77005-2750 pation / Job title (See Instructions)		Employer (See Instructions Chandler McNulty LLP	<u> </u> s)		
	Date 06/06/2024	Full name of contributor out-of-state PAC Chandler, Troy Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$2,000.00
	Principal occu Attorney	Houston, TX 77005 pation / Job title (See Instructions)		Employer (See Instructions Chandler mcnulty	<u> </u> s)		
	Date 01/06/2024	Full name of contributor out-of-state PAC Coffey, Nelwyn Contributor address; City; State; Zip Code Houston, TX 77040)		Amount of Contribution (\$)	\$20.00
	Principal occu Not employe	pation / Job title (See Instructions)		Employer (See Instructions Not employed	<u>I</u> S)		
	Date 01/19/2024	Full name of contributor out-of-state PAC Coffey, Nelwyn Contributor address; City; State; Zip Code Houston, TX 77040)		Amount of Contribution (\$)	\$25.00
	Principal occu Not employe	pation / Job title (See Instructions)		Employer (See Instructions Not employed	5)		

	MONET	ARY POLITICAL CONTRIE	BUTION	IS		SCHEDULI	E A1
	The Instruc	ction Guide explains how to comple	te this for	n.	1	Total pages Schedule A1: Sch: 3/24 Rpt: 6/48	
2	FILER NAME Rosenthal, J	on E. (The Honorable)			3	Filer ID (Ethics Commission 00082332	n Filers)
4	Date 02/06/2024	 Full name of contributor out-of-state coffey, Nelwyn Contributor address; City; State; Zip Code 	PAC (ID#:)	7	Amount of Contribution (\$)	\$20.00
8	Principal occur	Houston, TX 77040 pation / Job title (See Instructions)	la la	Employer (See Instructions	-, 		
Ü	Not employe			Not employed	<i>>)</i>		
	Date 03/06/2024	Full name of contributor out-of-state Coffey, Nelwyn Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$20.00
		Houston, TX 77040			Ĺ		
	Not employe	pation / Job title (See Instructions) d		Employer (See Instructions Not employed	S)		
	Date 04/06/2024	Full name of contributor out-of-state Coffey, Nelwyn Contributor address; City; State; Zip Code	PAC (ID#:)	•	Amount of Contribution (\$)	\$20.00
		Houston, TX 77040					
	Principal occu Not employe	pation / Job title (See Instructions) d		Employer (See Instructions Not employed	5)		
	Date 05/06/2024	Coffey, Nelwyn	PAC (ID#:)		Amount of Contribution (\$)	\$20.00
	Principal occu Not employe	pation / Job title (See Instructions)		Employer (See Instructions Not employed	<u>I</u> S)		
	Date 06/06/2024	Full name of contributor out-of-state Coffey, Nelwyn Contributor address; City; State; Zip Code Houston, TX 77040)	•	Amount of Contribution (\$)	\$20.00
	Principal occu Not employe	pation / Job title (See Instructions) d		Employer (See Instructions Not employed	5)		
			1				

	MONEI	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 4/24 Rpt: 7/48	
2	FILER NAME Rosenthal, J	on E. (The Honorable)			3	Filer ID (Ethics Commission 00082332	n Filers)
4	Date 06/26/2024	5 Full name of contributor Coleman, Dee6 Contributor address; City; S	out-of-state PAC (ID#:	_	7	Amount of Contribution (\$)	\$135.00
8	Principal occu Not Employe	Houston, TX 77084 pation / Job title (See Instructionsed	s) !	Employer (See Instructions Not Employed	5)		
	Date 01/20/2024	Full name of contributor Cook, Molly Contributor address; City; S Houston, TX 77030	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$15.00
	Principal occu ER Nurse	pation / Job title (See Instructions	5)	Employer (See Instructions Hospital	<u> </u> S)		
	Date 03/05/2024	Full name of contributor Copeland, Harold Contributor address; City; S	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$20.00
		Houston, TX 77263 pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> S)		
	Date 01/20/2024	Full name of contributor Cummings, Tara Contributor address; City; S Cypress, TX 77429	out-of-state PAC (ID#:	Not Employed	•	Amount of Contribution (\$)	\$25.00
	Principal occu Psychologist	pation / Job title (See Instructions	s)	Employer (See Instructions VA	5)		
	Date 06/05/2024	Full name of contributor Curry, Casey Contributor address; City; S Houston, TX 77004	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$100.00
		pation / Job title (See Instructions tions & Philanthropy	s)	Employer (See Instructions alliantgroup	5)		

	MONET	ARY POLITICAL CON	ITRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to c	omplete this forn	n.	1	Total pages Schedule A1: Sch: 5/24 Rpt: 8/48	
2	FILER NAME Rosenthal, J	on E. (The Honorable)			3	Filer ID (Ethics Commission 00082332	n Filers)
4	Date 05/16/2024	5 Full name of contributor ou Dukes, Thomas6 Contributor address; City; State; Zip	it-of-state PAC (ID#: p Code)	7	Amount of Contribution (\$)	\$100.00
8	Principal occur	San Antonio, TX 78209 pation / Job title (See Instructions)	la la	Employer (See Instructions			
0	Not Employe			Not Employed	,		
	Date 06/20/2024	Full name of contributor ou Edelbach, Ralph Contributor address; City; State; Zi	nt-of-state PAC (ID#: p Code)		Amount of Contribution (\$)	\$50.00
		Cypress, TX 77433					
	Principal occup Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed)		
	Date 06/17/2024	Full name of contributor ou Engelhart, Eva Contributor address; City; State; Zi	p Code)		Amount of Contribution (\$)	\$100.00
		Houston, TX 77056					
	Principal occu attorney	pation / Job title (See Instructions)		Employer (See Instructions Ross Banks)		
	Date 05/17/2024	Full name of contributor ou ou Evbagharu, Odus Contributor address; City; State; Zij Katy, TX 77449				Amount of Contribution (\$)	\$250.00
	Principal occu Communicat	pation / Job title (See Instructions) ions Director		Employer (See Instructions Harris County Democrat		Party	
	Date 04/02/2024	Full name of contributor ou	ut-of-state PAC (ID#: p Code)		Amount of Contribution (\$)	\$15.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed)		
			1				

	MONET	ARY POLITICAL CONTRIBU	TION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete tl	his for	m.	1	Total pages Schedule A1: Sch: 6/24 Rpt: 9/48	
2	FILER NAME Rosenthal, J	on E. (The Honorable)			3	Filer ID (Ethics Commission 00082332	n Filers)
4	Date 04/09/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$15.00
8	Principal occu	San Marcos, TX 78666-5129 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>		
	Not Employe			Not Employed	,		
	Date 06/03/2024	Full name of contributor out-of-state PAC Farr, Gerald Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.00
		San Marcos, TX 78666-5129					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	s)		
	Date 06/03/2024	Full name of contributor out-of-state PAC Friedman, J. Kent Contributor address; City; State; Zip Code	(ID#:)	•	Amount of Contribution (\$)	\$500.00
		Houston, TX 77056	-		<u></u>		
	Attorney	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date 06/18/2024	Full name of contributor out-of-state PAC Garcia, Elaina Contributor address; City; State; Zip Code Cypress, TX 77429)	•	Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	5)		
	Date 05/29/2024	Full name of contributor out-of-state PAC Geretz, Elizabeth Contributor address; City; State; Zip Code Houston, TX 77098	(ID#:		•	Amount of Contribution (\$)	\$50.00
	Principal occu Project Mana	pation / Job title (See Instructions)		Employer (See Instructions Harris County Precinct			
	- TOJECT MIGHT	<u></u>		riams County Flechicl	+		

	MONEI	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 7/24 Rpt: 10/48	
2	FILER NAME Rosenthal, J	on E. (The Honorable)			3	Filer ID (Ethics Commission 00082332	n Filers)
4	Date 01/11/2024	5 Full name of contributorGilliam, Lance6 Contributor address; City; St	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$500.00
8	Principal occu Real Estate	Houston, TX 77019 pation / Job title (See Instructions	(9)	9 Employer (See Instruction: WSG-RE LLC	5)		
	Date 02/04/2024	Full name of contributor Goodrich Sr., Earnest Contributor address; City; Si Cypress, TX 77433	out-of-state PAC (ID#: ate; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occupation / Job title (See Instructions)		Employer (See Instruction:	<u> </u> s)			
	Date 01/18/2024	Full name of contributor Graber, Richard Contributor address; City; Si	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$18.00
	Dringing! goog	Houston, TX 77025 ipal occupation / Job title (See Instructions) Employer (See Instructions					
	computer co			self	>)		
01/20/2024 Greene, David Contributor address;		Full name of contributor Greene, David Contributor address; City; Si Katy, TX 77449	out-of-state PAC (ID#: ate; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu Owner/Gene	pation / Job title (See Instructions	s)	Employer (See Instructions Trenton Hoyt LLC	<u> </u> S)		
	Date 01/26/2024	Full name of contributor Haley, Anthony Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu consultant	pation / Job title (See Instructions	s)	Employer (See Instructions hmwk IIc	5)		

	MONEI	ARY POLITICAL CON	ITRIBUTIONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to c	omplete this form.	1	Total pages Schedule A1: Sch: 8/24 Rpt: 11/48	
2	FILER NAME	on F (The Henry melde)		3	Filer ID (Ethics Commission	n Filers)
_		on E. (The Honorable)			00082332	
05/29/2024 Haley, Anthony		—	ut-of-state PAC (ID#:ip Code		Amount of Contribution (\$)	\$500.00
		Austin, TX 78701				
8	Principal occu consultant	pation / Job title (See Instructions)		oloyer (See Instructions) vk IIc		
	Date 01/30/2024	Full name of contributor on the definition of th	ut-of-state PAC (ID#:ip Code		Amount of Contribution (\$)	\$20.00
		Houston, TX 77008				
	Principal occupation / Job title (See Instructions) Not employed			loyer (See Instructions) employed		
	Date 02/29/2024	Full name of contributor on the definition of th	ut-of-state PAC (ID#:ip Code)	Amount of Contribution (\$)	\$20.00
		Houston, TX 77008				
	Principal occu Not employe	pation / Job title (See Instructions) d		lloyer (See Instructions) employed		
Date Full name of contributor 03/30/2024 Hanks, Liz		–	ut-of-state PAC (ID#:i ip Code		Amount of Contribution (\$)	\$20.00
	Principal occu Not employe	pation / Job title (See Instructions)		lloyer (See Instructions) employed		
	Date 04/30/2024	Full name of contributor on Hanks, Liz Contributor address; City; State; Z Houston, TX 77008	ut-of-state PAC (ID#:ip Code)	Amount of Contribution (\$)	\$20.00
	Principal occu Not employe	pation / Job title (See Instructions)		oloyer (See Instructions) employed		

	MONET	ARY POLITICAL CON	TRIBUTION	S		SCHEDUI	LE A1
	The Instruc	ction Guide explains how to co	mplete this form	n.	1	Total pages Schedule A1: Sch: 9/24 Rpt: 12/48	
2	FILER NAME Rosenthal, J	on E. (The Honorable)			3	Filer ID (Ethics Commission 00082332	on Filers)
4	Date 05/30/2024	Hanks, Liz	of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$20.00
8	Principal occu	Houston, TX 77008 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>		
	Not employe			Not employed	,		
	Date 06/30/2024	Hanks, Liz Contributor address; City; State; Zip	of-state PAC (ID#:)		Amount of Contribution (\$)	\$20.00
	Principal occur	Houston, TX 77008 pation / Job title (See Instructions)		Employer (See Instructions	.)		
	Not employe			Not employed	')		
	Date 06/05/2024	Full name of contributor out- Hayes Hunter PC Contributor address; City; State; Zip	of-state PAC (ID#:)		Amount of Contribution (\$)	\$350.00
		Houston, TX 77027					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 05/01/2024	Full name of contributor out- Home-PAC Contributor address; City; State; Zip Houston, TX 77064	of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 04/15/2024	Full name of contributor out- Houston Fire Fighters Political Ad Contributor address; City; State; Zip Houston, TX 77009				Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTI		SCHEDULE A1			
	The Instruc	ction Guide explains how to com	plete this form	m.	1	Total pages Schedule A1: Sch: 10/24 Rpt: 13/48	
2	FILER NAME Rosenthal, J	on E. (The Honorable)			3	Filer ID (Ethics Commission 00082332	n Filers)
4	Date 01/20/2024	Huynh, Au	state PAC (ID#: ode		7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Cypress, TX 77433 pation / Job title (See Instructions)	9	Employer (See Instructions	:) 		
Ū	Not Employe			Not Employed	',		
	Date 01/28/2024	Full name of contributor out-of- Jeudy, Wil Contributor address; City; State; Zip Co	state PAC (ID#:)		Amount of Contribution (\$)	\$60.00
		Houston, TX 77008			_		
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions Next Level Urgent Care	5)		
	Date 02/28/2024	Full name of contributor out-of- Jeudy, Wil Contributor address; City; State; Zip Co	state PAC (ID#:)		Amount of Contribution (\$)	\$60.00
		Houston, TX 77008					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions Next Level Urgent Care	5)		
	Date 03/28/2024	Jeudy, Wil	state PAC (ID#: ode			Amount of Contribution (\$)	\$60.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions Next Level Urgent Care	<u> </u> (i)		
	Date 04/28/2024	Jeudy, Wil	state PAC (ID#:			Amount of Contribution (\$)	\$60.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions Next Level Urgent Care	5)		
	i nysician			TYON LOVE OIGEN CAIE			

	MONEI	ARY POLITICAL (SCHEDULE A1				
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 11/24 Rpt: 14/48	
2	FILER NAME	on E. (The Henerable)			3	Filer ID (Ethics Commissio	n Filers)
_		on E. (The Honorable)			L	00082332	
4	Date 05/28/2024	5 Full name of contributor Jeudy, Wil6 Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)	7	Amount of Contribution (\$)	\$60.00
		Houston, TX 77008					
8	Principal occu	pation / Job title (See Instructions) 9	Employer (See Instructions	<u></u>		
	Physician			Next Level Urgent Care			
	Date 06/28/2024	Full name of contributor Jeudy, Wil Contributor address; City; St	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$60.00
		Houston, TX 77008					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Physician			Next Level Urgent Care			
	Date 05/17/2024	Full name of contributor Johnson, Darryl	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
		Contributor address; City; St	ate; Zip Code				
		Dallas, TX 75254					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Sales			JohnsonJonesBenefits			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/20/2024	Jones, Lauren Contributor address; City; St	ate; Zip Code		•		\$25.00
		Houston, TX 77091					
	Principal occu Accountant	pation / Job title (See Instructions)	Employer (See Instructions Callon Energy	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	05/15/2024	Kanayan, Philip					\$500.00
		Contributor address; City; St Houston, TX 77007	ate; Zip Code				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney			Karst and von Oiste LLF)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 12/24 Rpt: 15/48	
2	FILER NAME Rosenthal, J	lon E. (The Honorable)		3	Filer ID (Ethics Commission 00082332	ı Filers)
4	Date 01/30/2024	5 Full name of contributor out-of-state PAC (ID#:_ Lahey, Marieke 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$15.00
_	<u></u>	Houston, TX 77006				
8	Engineer	pation / Job title (See Instructions)	9 Employer (See Instructions) ExxonMobil)		
	Date 02/29/2024	Full name of contributor out-of-state PAC (ID#: Lahey, Marieke Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$15.00
	Deignaignal annu	Houston, TX 77006	Franklause (Coo lasterations)			
	Engineer	pation / Job title (See Instructions)	Employer (See Instructions) ExxonMobil)		
	Date 03/30/2024	Full name of contributor out-of-state PAC (ID#:_ Lahey, Marieke Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$15.00
		Houston, TX 77006				
	Principal occu Engineer	pation / Job title (See Instructions)	Employer (See Instructions) ExxonMobil)		
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_Lahey, Marieke Contributor address; City; State; Zip Code Houston, TX 77006			Amount of Contribution (\$)	\$15.00
	Principal occu Engineer	pation / Job title (See Instructions)	Employer (See Instructions) ExxonMobil)		
	Date 05/30/2024	Full name of contributor out-of-state PAC (ID#:_Lahey, Marieke Contributor address; City; State; Zip Code Houston, TX 77006)		Amount of Contribution (\$)	\$15.00
	Principal occu Engineer	pation / Job title (See Instructions)	Employer (See Instructions) ExxonMobil)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 13/24 Rpt: 16/48	
2	FILER NAME Rosenthal, J	Ion E. (The Honorable)		3	Filer ID (Ethics Commission 00082332	n Filers)
4	Date 06/30/2024	5 Full name of contributor out-of-state PAC (ID#:_Lahey, Marieke 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$15.00
_		Houston, TX 77006				
8	Principal occu Engineer	ipation / Job title (See Instructions)	9 Employer (See Instructions ExxonMobil)		
	Date 01/20/2024	Full name of contributor out-of-state PAC (ID#:_ Lam, Tana Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Dringing agg	Cypress, TX 77433	Employer (Co.) Instructions			
	Computer P	ipation / Job title (See Instructions) rogrammer	Employer (See Instructions NRG Energy)		
	Date 06/06/2024	Full name of contributor out-of-state PAC (ID#:_ Lanagan, Lindsay Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00
		Houston, TX 77009				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions Not Employed)		
	Date 01/26/2024	Full name of contributor out-of-state PAC (ID#:_Lemmond, byron Contributor address; City; State; Zip Code Katy, TX 77449-7504			Amount of Contribution (\$)	\$15.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions Wood)		
	Date 01/30/2024	Full name of contributor out-of-state PAC (ID#:_ Maguire-Powell, Alison Contributor address; City; State; Zip Code Denton, TX 76210)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions Not Employed)		

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDULI	■ A1
	The Instruc	ction Guide explains how	to complete this for	n.	1	Total pages Schedule A1: Sch: 14/24 Rpt: 17/48	
2	FILER NAME Rosenthal, J	on E. (The Honorable)			3	Filer ID (Ethics Commission 00082332	ı Filers)
4	Date 02/29/2024	5 Full name of contributor Maguire-Powell, Alison6 Contributor address; City; Sta	out-of-state PAC (ID#: ate; Zip Code)	7	Amount of Contribution (\$)	\$10.00
8	Principal occur	Denton, TX 76210 pation / Job title (See Instructions)	9	Employer (See Instructions	;) 		
	Not Employe			Not Employed	,,		
	Date 03/30/2024	Full name of contributor Maguire-Powell, Alison Contributor address; City; Sta)		Amount of Contribution (\$)	\$10.00
		Denton, TX 76210					
	Principal occur Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	5)		
	Date 04/30/2024	Full name of contributor Maguire-Powell, Alison Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$10.00
		Denton, TX 76210					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	5)		
	Date 05/30/2024	Full name of contributor Maguire-Powell, Alison Contributor address; City; Sta Denton, TX 76210	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	5)		
	Date 06/30/2024	Full name of contributor Maguire-Powell, Alison Contributor address; City; Sta Denton, TX 76210	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	pioyo						

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDULI	A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 15/24 Rpt: 18/48	
2	FILER NAME Rosenthal, J	on E. (The Honorable)			3	Filer ID (Ethics Commission 00082332	Filers)
4	Date 01/19/2024	Full name of contributor Mc Ewen, Jack Contributor address; City; Sta	out-of-state PAC (ID#: ite; Zip Code)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu Not Employe		9	Employer (See Instructions Not Employed	<u>;</u>)		
	Date 01/21/2024	Full name of contributor Mc Guire, Lisa Contributor address; City; Sta Houston, TX 77064	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Networking N	pation / Job title (See Instructions)		Employer (See Instructions Escalante Engineering	5)		
	Date 02/21/2024	Full name of contributor Mc Guire, Lisa Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu	Houston, TX 77064 pation / Job title (See Instructions)		Employer (See Instructions) 		
	Networking N			Escalante Engineering	·)		
	Date 03/21/2024	Full name of contributor Mc Guire, Lisa Contributor address; City; Sta Houston, TX 77064	out-of-state PAC (ID#: tte; Zip Code)		Amount of Contribution (\$)	\$50.00
	Principal occu Networking N	pation / Job title (See Instructions) Manager		Employer (See Instructions Escalante Engineering	()		
	Date 04/21/2024	Full name of contributor Mc Guire, Lisa Contributor address; City; Sta Houston, TX 77064	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Networking N	pation / Job title (See Instructions) Manager		Employer (See Instructions Escalante Engineering)		

	MONEI	ONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 16/24 Rpt: 19/48		
2	FILER NAME	lan E (The Hermanish)			3	Filer ID (Ethics Commission	n Filers)	
_		on E. (The Honorable)			L	00082332		
4	Date 05/21/2024	5 Full name of contributor Mc Guire, Lisa6 Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)	7	Amount of Contribution (\$)	\$50.00	
		Houston, TX 77064						
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)			
	Networking N	Manager		Escalante Engineering				
	Date 06/21/2024	Full name of contributor Mc Guire, Lisa Contributor address; City; Sta	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$50.00	
		Houston, TX 77064						
		pation / Job title (See Instructions)		Employer (See Instructions	s)			
	Networking N	Manager		Escalante Engineering				
	Date 02/06/2024	Full name of contributor Millar, Ron Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00	
		Arlington, VA 22201						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			
	PAC Coordin	nator		Center for Freethought	Eq	uality		
	Date 01/20/2024	Full name of contributor Morgan, Paul Contributor address; City; Sta Houston, TX 77064	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$100.00	
	Principal occu Not employe	pation / Job title (See Instructions)		Employer (See Instructions Not employed	s)			
	Date 02/20/2024	Full name of contributor Morgan, Paul Contributor address; City; Sta Houston, TX 77064	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$100.00	
	Principal occu Not employe	pation / Job title (See Instructions)		Employer (See Instructions Not employed	5)			

	MONEI	ARY POLITICAL C		SCHEDULE A1			
	The Instruc	ction Guide explains how	to complete this for	n.	1	Total pages Schedule A1: Sch: 17/24 Rpt: 20/48	
2	FILER NAME	on E. (The Honorable)			3	Filer ID (Ethics Commission 00082332	n Filers)
_			—		<u> </u>		
4	Date 03/20/2024	 5 Full name of contributor Morgan, Paul 6 Contributor address; City; State 	out-of-state PAC (ID#: ate; Zip Code)	′	Amount of Contribution (\$)	\$100.00
Ω	Principal occur	Houston, TX 77064 pation / Job title (See Instructions) la	Employer (See Instructions			
o	Not employe		,	Not employed)		
	Date 04/20/2024	Full name of contributor Morgan, Paul Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Dringinal occur	pation / Job title (See Instructions)	<u>, </u>	Employer (See Instructions	·, 		
	Not employe		'	Not employed	')		
		Full name of contributor			<u> </u>	A (A)	
	Date 05/20/2024	Morgan, Paul Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
		Houston, TX 77064					
	Principal occu	pation / Job title (See Instructions))	Employer (See Instructions	<u></u>		
	Not employe	d		Not employed			
	Date 06/20/2024	Full name of contributor Morgan, Paul Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Not employe	pation / Job title (See Instructions)		Employer (See Instructions Not employed	5)		
	Date 06/06/2024	Full name of contributor Munoz, Lindsay Contributor address; City; Sta Houston, TX 77027	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu Consulting	pation / Job title (See Instructions)		Employer (See Instructions Whitmire & Munoz LLC	5)		
			·				

	MONEI	ARY POLITICAL (CONTRIBUTIO	N	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this f	orı	n.	1	Total pages Schedule A1: Sch: 18/24 Rpt: 21/48	
2	FILER NAME					3	Filer ID (Ethics Commission	n Filers)
		on E. (The Honorable)	_				00082332	
4	Date 05/24/2024	5 Full name of contributor Nagy, Nancy6 Contributor address; City; S	out-of-state PAC (ID#:_ ate; Zip Code)	7	Amount of Contribution (\$)	\$5.00
8	Principal occu	Ridge, NY 11961 pation / Job title (See Instructions	9	9	Employer (See Instructions			
Ü	Saving the W		''		self	,,		
	Date 06/06/2024	Full name of contributor Peruchini, Jerry Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$150.00
		Houston, TX 77007		_				
		pation / Job title (See Instructions	5)		Employer (See Instructions	5)		
	Managemen				Deloitte			
	Date 01/16/2024	Full name of contributor Pratt Truitt, Camille Contributor address; City; S	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$25.00
		Houston, TX 77064						
	Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions	5)		
	Not Employe	ed			Not Employed			
	Date 02/16/2024	Full name of contributor Pratt Truitt, Camille Contributor address; City; Si Houston, TX 77064	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	s)		Employer (See Instructions Not Employed	5)		
	Date 03/16/2024	Full name of contributor Pratt Truitt, Camille Contributor address; City; S Houston, TX 77064	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	s)		Employer (See Instructions Not Employed	;)		

	MONET	ARY POLITICAL CO		SCHEDULE A1			
	The Instru	ction Guide explains how t	o complete this form	n.	1	Total pages Schedule A1: Sch: 19/24 Rpt: 22/48	
2	FILER NAME Rosenthal, J	on E. (The Honorable)			3	Filer ID (Ethics Commission 00082332	n Filers)
4	Date 04/16/2024	6 Contributor address; City; Stat	out-of-state PAC (ID#:e; Zip Code)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu Not Employe	Houston, TX 77064 pation / Job title (See Instructions)	9	Employer (See Instructions Not Employed	<u> </u>		
	Date 05/16/2024	Full name of contributor Pratt Truitt, Camille Contributor address; City; State Houston, TX 77064	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u> </u> 5)		
	Date 06/16/2024	Full name of contributor Pratt Truitt, Camille Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$25.00
		Houston, TX 77064 pation / Job title (See Instructions)		Employer (See Instructions	 - s)		
	Date 06/19/2024	Full name of contributor Roach, Jonathan Contributor address; City; State Spring, TX 77380	out-of-state PAC (ID#:	Not Employed		Amount of Contribution (\$)	\$500.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Roach & Associates PL			
	Date 01/19/2024	Full name of contributor Romero, Olga Contributor address; City; State Houston, TX 77065	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$15.00
	Principal occu Sr. CRA	pation / Job title (See Instructions)		Employer (See Instructions IqviA	s)		

	MONET	ARY POLITICAL (CONTRIBUTIO)N	IS 		SCHEDULE	A1
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 20/24 Rpt: 23/48	
2	FILER NAME Rosenthal, J	on E. (The Honorable)				3	Filer ID (Ethics Commission 00082332	Filers)
4	Date 02/19/2024	5 Full name of contributor Romero, Olga6 Contributor address; City; St	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$15.00
		Houston, TX 77065						
8	Principal occu Sr. CRA	pation / Job title (See Instructions	s)	9	Employer (See Instructions IqviA	s)		
	Date 03/19/2024	Full name of contributor Romero, Olga Contributor address; City; Si)	•	Amount of Contribution (\$)	\$15.00
	Principal occu	Houston, TX 77065 pation / Job title (See Instructions			Employer (See Instructions	<u>''</u>		
	Sr. CRA	pation / Job title (See Instructions)		IqviA))		
	Date 04/19/2024	Full name of contributor Romero, Olga Contributor address; City; St)		Amount of Contribution (\$)	\$15.00
		Houston, TX 77065						
	Principal occu Sr. CRA	pation / Job title (See Instructions	s)		Employer (See Instructions IqviA	5)		
	Date 05/19/2024	Full name of contributor Romero, Olga Contributor address; City; St Houston, TX 77065	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$15.00
	Principal occu Sr. CRA	pation / Job title (See Instructions	s)		Employer (See Instructions IqviA	5)		
	Date 06/19/2024	Full name of contributor Romero, Olga Contributor address; City; Si Houston, TX 77065	out-of-state PAC (ID#:_ ate; Zip Code				Amount of Contribution (\$)	\$15.00
	Principal occu Sr. CRA	pation / Job title (See Instructions	s)		Employer (See Instructions IqviA	5)		

	MONET	ARY POLITICAL (SCHEDULE A				
	The Instru	ction Guide explains hov	v to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 21/24 Rpt: 24/48	
2	FILER NAME Rosenthal, J	on E. (The Honorable)				3	Filer ID (Ethics Commission 00082332	on Filers)
4	Date 06/03/2024	5 Full name of contributor Sammons, Kirk6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$500.00
_		Spring, TX 77379	, ,			<u></u>		
8	Attorney	pation / Job title (See Instruction	5)	9	Employer (See Instructions Sammons & Berry P.C.	5)		
	Date 01/20/2024	Full name of contributor Samson, Sharon Contributor address; City; S Houston, TX 77095					Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instruction	5)		Employer (See Instructions	<u> </u> (3)		
	Not Employe	ed			Not Employed			
	Date 05/17/2024	Full name of contributor Sowden, Mark Contributor address; City; S	out-of-state PAC (ID#: tate; Zip Code)		Amount of Contribution (\$)	\$100.00
		Houston, TX 77095						
	Principal occu Not Employe	pation / Job title (See Instruction: ed	5)		Employer (See Instructions Not Employed	5)		
	Date 06/07/2024	Full name of contributor Texas Sands PAC Contributor address; City; S Austin, TX 78701	out-of-state PAC (ID#:_			•	Amount of Contribution (\$)	\$4,000.00
	Principal occu	pation / Job title (See Instruction	5)		Employer (See Instructions	5)		
	Date 01/18/2024	Full name of contributor Thompson, Rueben Contributor address; City; S Amarillo, TX 79109	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructionsed	5)		Employer (See Instructions Not Employed	5)		
			,					

	MONEI	ARY POLITICAL (SCHEDUL	E A1		
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 22/24 Rpt: 25/48	
2	FILER NAME Rosenthal, J	on E. (The Honorable)			3	Filer ID (Ethics Commission 00082332	n Filers)
4	Date 06/12/2024					Amount of Contribution (\$)	\$150.00
8	Principal occu Not Employe	rincipal occupation / Job title (See Instructions) ot Employed 9 Employer (See Instruction Not Employed		9 Employer (See Instructions Not Employed	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 06/06/2024 Warner, Freddy Contributor address; City; State; Zip Code Houston, TX 77019		•	Amount of Contribution (\$)	\$500.00		
	Principal occupation / Job title (See Instructions) Chief Government Relations Officer Employer (See Instruction Memorial Hermann						
	Date Full name of contributor out-of-state PAC (ID#:) 06/03/2024 Willey III, Edward Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$200.00	
	Dringing! goog	Houston, TX 77006	, I	Employer (See Instructions	<u>,,</u>		
	Attorney	pation / Job title (See Instructions)	Academy Sports + Outc	-	rs	
	Date 06/06/2024	Full name of contributor Willey III, Edward Contributor address; City; St Houston, TX 77006	out-of-state PAC (ID#: ate; Zip Code			Amount of Contribution (\$)	\$200.00
	Principal occupation / Job title (See Instructions) Attorney Employer (See Instructions) Academy Sports				-	rs	
	Date O1/28/2024 Full name of contributor out-of-state PAC (ID#:) Williams, Angela Contributor address; City; State; Zip Code Katy, TX 77449			Amount of Contribution (\$)	\$10.00		
	Principal occu Benefits Mar	pation / Job title (See Instructions nager)	Employer (See Instructions ALS Group USA Corp	5)		

	MONET	ARY POLITICAL C		SCHEDULE	DULE A1		
	The Instru	ction Guide explains how	to complete this for	n.	1	Total pages Schedule A1: Sch: 23/24 Rpt: 26/48	
2	FILER NAME Rosenthal, J	on E. (The Honorable)			3	Filer ID (Ethics Commission 00082332	r Filers)
4	Date 02/28/2024	5 Full name of contributor Williams, Angela6 Contributor address; City; Sta	out-of-state PAC (ID#: atte; Zip Code)	7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Katy, TX 77449 pation / Job title (See Instructions)	lo.	Employer (See Instructions	·/		
0	Benefits Mar		9	ALS Group USA Corp))		
	Date Full name of contributor out-of-state PAC (ID#:) 03/28/2024 Williams, Angela Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00		
Dringinal accu		Katy, TX 77449 pation / Job title (See Instructions)	;) 				
	Benefits Mar			Employer (See Instructions ALS Group USA Corp			
	Date Full name of contributor out-of-s 04/28/2024 Williams, Angela Contributor address; City; State; Zip Co		out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$10.00
		Katy, TX 77449					
	Principal occu Benefits Mar	pation / Job title (See Instructions)		Employer (See Instructions ALS Group USA Corp	s)		
	Date 05/28/2024	Full name of contributor Williams, Angela Contributor address; City; Sta	out-of-state PAC (ID#: atte; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occupation / Job title (See Instructions) Benefits Manager			Employer (See Instructions ALS Group USA Corp	<u> </u>		
	Date Full name of contributor out-of-state PAC (ID#:) 06/28/2024 Williams, Angela Contributor address; City; State; Zip Code Katy, TX 77449)		Amount of Contribution (\$)	\$10.00	
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Benefits Mar	nager		ALS Group USA Corp			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 24/24 Rpt: 27/48		
2	FILER NAME Rosenthal, J	Jon E. (The Honorable)		3	Filer ID (Ethics Commission 00082332	n Filers)
4	Date 02/28/2024	 Full name of contributor out-of-state PAC (ID#:_Zawadzki, Stan Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$20.00
8	Principal occu	Houston, TX 77095 spation / Job title (See Instructions)	9 Employer (See Instructions	6)		
Ů	Consultant	pation 7 Job title (See Instructions)	Self	5)		
	Date 06/06/2024	Full name of contributor out-of-state PAC (ID#:_Zeis, Matt Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Houston, TX 77009				
	Principal occu Partner	ipation / Job title (See Instructions)	s) Ad	visors		
	Date 06/03/2024	Full name of contributor out-of-state PAC (ID#:_skelly, michael Contributor address; City; State; Zip Code Houston, TX 77003			Amount of Contribution (\$)	\$250.00
	Principal occubanker	upation / Job title (See Instructions)	Employer (See Instructions lazard	s)		

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 28/48 3 Filer ID (Ethics Commission Filers) FILER NAME Rosenthal, Jon E. (The Honorable) 00082332 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution Date out-of-state PAC (ID#: Amount of contribution (\$) description 06/04/2024 Schechter, Lillie \$473.00 I food for event 7 Contributor address; City; State; Zip Code Houston, TX 77266 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) Consultant Self 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Date Full name of contributor Amount of out-of-state PAC (ID#: contribution (\$) description 06/06/2024 Schechter, Lillie \$277.50 I food for event Contributor address; City; State; Zip Code Houston, TX 77266 Check if travel outside of Texas. Complete Schedule T. (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) 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)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/20 Rpt: 29/48	Rosenthal, Jon E. (The Honorable) 00082332
4	Date	5 Payee name
	01/18/2024	2 B Luxe Events and Rentals
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$700.00	5829 W Sam Houston Pkwy N
		suite 801
		Houston, TX 77041
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense office opening decorations
		office opening decorations
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/23/2024	ATT
	Amount (\$)	Payee address; City; State; Zip Code
	\$110.65	208 S. Akard St.
		Dallas, TX 75202
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense campaign phone
		campaign prioric
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/22/2024	ATT
	Amount (\$)	Payee address; City; State; Zip Code
	\$110.39	208 S. Akard St.
		Dallas, TX 75202
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		campaign phone
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
Г		
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ing Expense Event Expense Loan Repayment/Reimbu

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

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

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: 2/20 Rpt: 30/48	Rosenthal, Jon E. (The Honorable) 00082332
4	Date	5 Payee name
	03/22/2024	ATT
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$105.39	208 S. Akard St.
		Dallas, TX 75202
8	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 phono
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/23/2024	ATT
	Amount (\$)	Payee address; City; State; Zip Code
	\$110.35	208 S. Akard St.
	Ψ110.00	200 O. 7 Mara Ot.
		Dallas, TX 75202
	PURPOSE	1
	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	Check if Austin, TX, officeholder living expense
		campaign phone
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiulture to beliefit C/Or	
	Date	Payee name
	05/22/2024	ATT
	Amount (\$)	Payee address; City; State; Zip Code
	\$162.30	208 S. Akard St.
		Dallas, TX 75202
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	_/	Check if Austin, TX, officeholder living expense
		campaign phone
	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 Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services 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)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/20 Rpt: 31/48	Rosenthal, Jon E. (The Honorable) 00082332
4	Date	5 Payee name
	06/24/2024	ATT
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$110.35	208 S. Akard St.
		Dallas, TX 75202
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		campaign phone
		Campaign phono
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
F	Date	Payee name
	06/30/2024	ActBlue
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$260.82	366 Sumner St
	Ψ200.02	300 Suffice St
		Somerville, MA 02114
⊢	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		credit card fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/31/2024	ActBlue
	Amount (\$)	Payee address; City; State; Zip Code
	\$91.25	366 Sumner St
		Somerville, MA 02114
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	2/11/2/10/12	Check if Austin, TX, officeholder living expense
		credit card fees
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	
\vdash		

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: 4/20 Rpt: 32/48	Rosenthal, Jon E. (The Honorable) 00082332
4	Date	5 Payee name
	02/29/2024	ActBlue
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.05	366 Sumner St
		Somerville, MA 02114
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense credit card fees
		Credit Card rees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
⊨	Data	
	Date	Payee name
L	03/31/2024	ActBlue
	Amount (\$)	Payee address; City; State; Zip Code
	\$13.66	366 Sumner St
		Somerville, MA 02114
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense credit card fees
		Credit Card rees
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	D-4-	
	Date	Payee name ActBlue
	04/30/2024	
	Amount (\$)	Payee address; City; State; Zip Code
	\$14.07	366 Sumner St
		Somerville, MA 02114
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense credit card fees
1		Great cara ices
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		
1		

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

ment Solicitation/Fundraising Expense
ense 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 Comm	mission Filers)
	Sch: 5/20 Rpt: 33/48	Rosenthal, Jon E. (The Honorable) 00082332	
4	Date	5 Payee name	
	05/31/2024	ActBlue	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$77.27	366 Sumner St	
		Somerville, MA 02114	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		credit card fees	
Ļ	0 1 0 0 1 1 1 1		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
┡	·		
	Date	Payee name	
L	01/16/2024	Amazon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$14.06	410 Terry Ave N	
l			
		Seattle, WA 98109	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
l		office supplies	
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
F	Date	Payee name	
	01/16/2024	Amazon	
⊢	Amount (\$)	Payee address; City; State; Zip Code	
	\$63.70		
l		Seattle, WA 98109	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF	Office Overhead/Rental Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		office supplies	
L			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experience to beliefit 6/01	~··	

SCHEDULE F1

Expense Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica			Legal Services	mais Expense	Salaries/V		se s/Contract Labor		OTHER (enter a	category not listed above)	
	Credit Card Payment			The Instruction	n Guide exp	lains how to co	mpl	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Fil	ers)
	Sch: 6/20 Rpt: 34/48		Rosenthal, J	on E. (The I	Honorable	!)				00082332		
4	Date	5	Payee name						_			
	04/17/2024		Annette Ran	nirez Campa	aign							
6	Amount (\$)	7	Payee addres	s; City;		State; Zip Co	ode					
	\$250.00		PO Box 667	204								
			Houston, TX	77266								
8	PURPOSE	(a)	Category (See	o Catogorios listo	t at the ten of t	his echodulo)	(b)	Description				
	OF	l`´	Office Overh			riis scriedule)	\ `´		outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE							_		officeholder living	g expense	
								campaign do	nat	ion		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	eholder name	Э	Office sou	ıght			Office h	eld	
		_										
	Date		Payee name									
	05/28/2024		Athena's Gre		ean Kitch	en						
	Amount (\$)		Payee addres			State; Zip Co	ode					
	\$330.00		13250 FM 5	29								
			Houston, TX	77041								
	PURPOSE	(a)	Category (Se	e Categories liste	d at the top of t	his schedule)	(b)	Description				
	OF EXPENDITURE		Office Overh	ead/Rental	Expense					de of Texas. Con officeholder living	plete Schedule T.	
								food	, 1,	oniceriolaer living	g expense	
	Complete ONLY if direct		Candidate/Offic	eholder name		Office sou	<u>I</u> ıght			Office h	eld	
	expenditure to benefit C/OI	Н					_					
	Date		Payee name									
	06/03/2024		BCOM SOLI	UTIONS								
	Amount (\$)		Payee addres	s; City;		State; Zip Co	ode					
	\$607.75		747 O St #1									
			Lincoln, NE	68508								
	PURPOSE	(a)	Category (See		d at the top of t	hio ochodulo)	(b)	Description				
	OF		Office Overh			riis scriedule)	(-,		outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE								, TX,	officeholder living	g expense	
								web hosting				
							<u> </u>					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offic	eholder name	Э	Office sou	ıght			Office h	eld	
												ı

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions Properties Made By

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
<u> </u>	T. 1 0 1 1 54	<u> </u>	
1	Total pages Schedule F1: Sch: 7/20 Rpt: 35/48	2 FILER NAME Rosenthal, Jon E. (The Honorable) 3 Filer ID (Ethics Commission File 00082332	ers)
4	Date	5 Payee name	
	01/29/2024	Bayou City Strategies	
6	Amount (\$) \$1,750.00	7 Payee address; City; State; Zip Code PO Box 667204 Houston, TX 77266	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Consulting Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense fundraising and compliance services	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	02/27/2024	Bayou City Strategies	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,750.00	PO Box 667204	
		Houston, TX 77266	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		fundraising and compliance services	
		in an area of the price of the control of the contr	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	03/27/2024	Bayou City Strategies	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,750.00	PO Box 667204	
		Houston, TX 77266	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		fundraising and compliance services	
L			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_		
1	Total pages Schedule F1: Sch: 8/20 Rpt: 36/48	2 FILER NAME Rosenthal, Jon E. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00082332
		Noschthat, 30H E. (The Honorable)
4	Date	5 Payee name
	04/29/2024	Bayou City Strategies
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,750.00	PO Box 667204
		Houston, TV 77266
		Houston, TX 77266
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		fundraising and compliance services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/28/2024	Bayou City Strategies
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,750.00	PO Box 667204
	Ψ1,100.00	1 0 50% 007204
		Houston, TX 77266
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		fundraising and compliance services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H	Date	Payee name
	06/27/2024	Bayou City Strategies
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,750.00	PO Box 667204
		Houston, TX 77266
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		fundraising and compliance services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

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		
	creat card r dyment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 9/20 Rpt: 37/48	Rosenthal, Jon E. (The Honorable) 00082332	
4	Date	5 Payee name	
	05/01/2024	Braved	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$395.00	1135 Pasadena Ave S STE 111	
		South Pasadena, FL 33707	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Candidate/Officeholder/Political Committee	
		education advocacy group (membership)	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/Oi	п	
	Date	Payee name	
	06/10/2024	C-Stem	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.00	3226 Alabama St	
		Houston, TX 77004	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
	EXI ENDITORE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
		donation	
	Operation ONLY if allowed	Our distance (Office health an array of the country	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
		T	
	Date	Payee name	
	01/18/2024	Cake Fine Pastry	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$252.00	13010 FM 529	
		Houston, TX 77041	
	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	
		office opening catering	
_	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 -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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	-
	Sch: 10/20 Rpt: 38/48	Rosenthal, Jon E. (The Honorable) 00082332	
4	Date	5 Payee name	_
	01/02/2024	Evbagharu, Odus	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$1,000.00	18226 Dusty Terrace Ln	
		Katy, TX 77449	
8	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	
		campaign stipend	
Ļ	Computate ONLY if direct	Condidate (Office holder name Office accepts	_
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
┡			=
	Date	Payee name	
	06/10/2024	GoDaddy	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$114.67	14455 N. Hayden Rd.	
		Scottsdale, AZ 85260	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense web hosting	
		web floating	
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
H	Date	Davisa nama	-
	01/25/2024	Payee name Google	
L			_
	Amount (\$) \$25.58	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway	
	Φ25.58	1000 Amphilineane Parkway	
		M	
		Mountain View, CA 94043	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if the real outside of Taylor Complete Schedule T	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Gsuite	
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
1	expenditure to benefit C/O		
Н			-

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 Committ

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor		Travel Out of Di OTHER (enter a	strict category not listed above)
ᆫ		The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	2 FILER NAME	3	Filer ID	(Ethics Commission Filers)
	Sch: 11/20 Rpt: 39/48	Rosenthal, Jon E. (The Honorable)		00082332	
4	Date	5 Payee name			
	02/01/2024	Google			
Ļ					
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$25.58	1600 Amphitheatre Parkway			
		Mountain View, CA 94043			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
ľ	OF			side of Texas. Com	plete Schedule T.
	EXPENDITURE	emec everneda//tental Expense		(, officeholder living	
		Gsuite			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	7ld
٦	expenditure to benefit C/O			Onice III	Jiu
L					
	Date	Payee name			
	03/04/2024	Google			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$25.58	1600 Amphitheatre Parkway			
		,			
		Mountain View CA 04042			
		Mountain View, CA 94043			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Office Overficad/Nertial Experise		side of Texas. Com	
		Gsuite	ustin, 17	(, officeholder living	g expense
		Gsuite			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought		Office h	eld
	expenditure to benefit 6/01				
	Date	Payee name			
	04/02/2024	Google			
H	Amount (\$)	Payee address; City; State; Zip Code			
	\$26.40	1600 Amphitheatre Parkway			
	Ψ20.40	2000 / amprilational of antivary			
		Mountain View, CA 94043			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Office Overficad/Nertial Experise		side of Texas. Com	
	LAPENDITORE		ustin, T>	(, officeholder living	g expense
		Gsuite			
L					
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office h	eld
1	expenditure to benefit C/O				
Г					
1					

SCHEDULE F1

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

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: 12/20 Rpt: 40/48	Rosenthal, Jon E. (The Honorable) 00082332
4	Date	5 Payee name
	05/02/2024	Google
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$30.70	1600 Amphitheatre Parkway
		Mountain View, CA 94043
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Gsuite
		Counte
Ļ	Complete ONLY if direct	Condidate/Officeholder name
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	· 	
	Date	Payee name
	06/03/2024	Google
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.70	1600 Amphitheatre Parkway
		Mountain View, CA 94043
	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
		Gsuite
		Counc
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/19/2024	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$53.89	646 S Flores St
		San Antonio, TX 78204
	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 office food
	0 1. 0	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	- Farmano to sonone or or	

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	Committee Legal Services Salaries/Wages/Control The Instruction Guide explains how to complete the	,
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 13/20 Rpt: 41/48	Rosenthal, Jon E. (The Honorable)	00082332
4	Date	5 Payee name	•
	05/17/2024	HEB	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$46.57	646 S Flores St	
		San Antonio, TX 78204	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Des	•
	EXPENDITURE	1 000/Develage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			ce food
		Onk	50 1000
_	Complete ONLY if direct	Candidate/Officeholder name Office cought	Office hold
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/16/2024	Harris County Democratic Party	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$250.00	4619 Lyons Ave	
		Houston, TX 77020	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	cription
	OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
	-	Garialdato/Gridorioladi/i Gilliotal Gerillintee	Check if Austin, TX, officeholder living expense Lation
		doi	alion
	0 1: 0.11.7.7.1.		000
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	06/06/2024	Harris County Democratic Party	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.00	4619 Lyons Ave	
		Houston, TX 77020	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	
	OF EXPENDITURE	Continuations/Donations wade by	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense
		doi	action
_	Complete ONLY 'C. I'	Canadidate/Officeholder: 17-17-1	Ott 1-1-1
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	- Firming to solione of of		

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/20 Rpt: 42/48	Rosenthal, Jon E. (The Honorable) 00082332
4	Date	5 Payee name
	03/01/2024	Harris County Democratic Party
6		
U	Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 4619 Lyons Ave
	φ300.00	4019 Lyons Ave
		W - TV = 1000
		Houston, TX 77020
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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		donation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
•	expenditure to benefit C/OI	
	Date	Payros namo
	02/20/2024	Payee name Lauren Ashley Simmons Campaign
	Amount (\$)	Payee address; City; State; Zip Code P.O. Box 56386
	\$500.00	P.O. 60X 30360
		Houston, TX 77256
	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
		donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/14/2024	Lauren Ashley Simmons Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	P.O. Box 56386
		Houston, TX 77256
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Event Exp Accounting/Banking Fees Consulting Expense Food/Bev Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Legal Ser

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	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: 15/20 Rpt: 43/48	Rosenthal, Jon E. (The Honorable) 00082332
4	Date	5 Payee name
	01/16/2024	NGP VAN
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$533.00	1445 New York Ave. NW
		Washington, DC 20005
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
	LXI LINDITORE	Check if Austin, TX, officeholder living expense
		fundraising software
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	
	Date	Payee name
	01/02/2024	NGP VAN
	Amount (\$)	Payee address; City; State; Zip Code
	\$533.00	1445 New York Ave. NW
		Washington, DC 20005
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		fundraising software
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/04/2024	NGP VAN
	Amount (\$)	Payee address; City; State; Zip Code
	\$533.00	1445 New York Ave. NW
	,	
		Washington, DC 20005
	PURPOSE	-
	OF	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		fundraising software
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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	e this form.
1	Total pages Schedule F1: Sch: 16/20 Rpt: 44/48	FILER NAME Rosenthal, Jon E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00082332
4	Date 03/07/2024	5 Payee name NGP VAN	,
6	Amount (\$) \$533.00	7 Payee address; City; State; Zip Code 1445 New York Ave. NW	
8	PURPOSE OF EXPENDITURE	Solicitation/Fundraising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense undraising software
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 05/02/2024	Payee name NGP VAN	
	Amount (\$) \$533.00	Payee address; City; State; Zip Code 1445 New York Ave. NW Washington, DC 20005	
	PURPOSE OF EXPENDITURE	Solicitation/Fundraising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense undraising software
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 06/03/2024	Payee name NGP VAN	
	Amount (\$) \$533.00	Payee address; City; State; Zip Code 1445 New York Ave. NW	
		Washington, DC 20005	
	PURPOSE OF EXPENDITURE	Solicitation/Fundraising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fundraising software
	Complete ONLY if direct expenditure to benefit C/O	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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
L		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/20 Rpt: 45/48	Rosenthal, Jon E. (The Honorable) 00082332
4	Date	5 Payee name
	01/22/2024	Senate Ave Brewing Co.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$639.79	16000 Dillard Dr Suite F
		Jersey Village, TX 77040
8	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 kickoff
L		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
		•
	Date	Payee name
	03/18/2024	Texas Democrats
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,300.00	PO Box 15707
		Austin, TX 78761
_	DUDDOCE	1
	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
		VAN access
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Payoo namo
	05/20/2024	Payee name Texas Gulf Coast Area Labor Federation
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	2506 Sutherland St
L		Houston, TX 77023
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		donation
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to beliefft 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 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 Commi	ssion Filers)
	Sch: 18/20 Rpt: 46/48	Rosenthal, Jon E. (The Honorable) 00082332	
4	Date	5 Payee name	
	01/16/2024	WEB REGISTER	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$68.99	5335 Gate Pkwy	
		Jacksonville, FL 32256	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
		Check if Austin, TX, officeholder living expense domain name	
		domainment	
9	Complete ONLY if direct	L L Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
_	Date	Payee name	
	01/24/2024	Zoom	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$34.10		
		Suite 600	
		San Jose, CA 95113	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	LAPENDITORE	Check if Austin, TX, officeholder living expense	
		Zoom account	
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	y	
-	Date	Payee name	
	02/26/2024	Zoom	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$34.10		
		Suite 600	
		San Jose, CA 95113	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITORE	Check if Austin, TX, officeholder living expense	
		Zoom account	
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
L			

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
Transport in District Travel in District Travel Out of District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 19/20 Rpt: 47/48	Rosenthal, Jon E. (The Honorable)	00082332
4	Date	5 Payee name	
	03/25/2024	Zoom	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$34.10	55 Almaden Blvd	
		Suite 600	
		San Jose, CA 95113	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE		Check if Austin, TX, officeholder living expense
			Zoom account
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	Complete ONLY if direct expenditure to benefit C/OH		Office field
_			
	Date	Payee name	
	04/24/2024	Zoom	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$34.10	55 Almaden Blvd	
		Suite 600	
		San Jose, CA 95113	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Zoom account
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
H	Date	Payee name	
	05/24/2024	Zoom	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$34.10	55 Almaden Blvd	
	Ψ04.10	Suite 600	
		San Jose, CA 95113	
	PURPOSE OF	(,	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense	Check if Austin, TX, officeholder living expense
			Zoom account
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OF	1	
_			

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/Political Credit Card Payment		/ - al Co	mmittee	Food/Beverage Expense Gift/Awards/Memorials E Legal Services	Expense	Polling Expense Printing Expense Salaries/Wages	se s/Contract Labor		Travel in Distric		
	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F1:	2	FILER NAM	E				3	Filer ID	(Ethics Commission	n Filers)
	Sch: 20/20 Rpt: 48/48		Rosenthal,	Jon E. (The Hon-	orable)				00082332		
4	Date	5	Payee name	<u> </u>							
	06/25/2024	ľ	Zoom	•							
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Code					
	\$34.10		55 Almade			·					
			Suite 600								
				04.05440							
		L	San Jose,	CA 95113							
8	PURPOSE	(a)	Category (S	See Categories listed at th	e top of this sch	edule) (b)	Description				
	OF EXPENDITURE		Office Over	rhead/Rental Exp	ense		ш			nplete Schedule T.	
	LA LIBITORE						_		, officeholder livir	ig expense	
							Zoom accour	nt			
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	ficeholder name	C	Office sought			Office h	eld	