FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00088276 29 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Ms. Brendetta Anthony NAME Date Received **ELECTRONICALLY FILED** 07/15/2024 NICKNAME LAST **SUFFIX** Scott CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** P.O. Box 1284 MAILING Amount Receipt # **ADDRESS** Change of Address Missouri City, TX 77459 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Elvina Renea NAME NICKNAME LAST **SUFFIX** Davis STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 1326 Mossridge **ADDRESS** (Residence or Business) Missouri City, TX 77489 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (832) 244-1302 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 02/25/2024 06/30/2024 10 ELECTION **ELECTION DATE ELECTION TYPE**

11 OFFICE

Day

11/05/2024

OFFICE HELD (if any)

Year

Month

Primary

X General

Runoff

Special

12 OFFICE SOUGHT (if known)

Other

Court Of Appeals, Justice Place 2 District First

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 29

13 C / OH NAME	Scott, Brendetta Anth	nony (Ms.)	14 Filer ID 00088276	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without d officeholders are required to report this information	the candidate's or offic	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
46 CONTRIBUTION	1 TOTAL INITEM	IZED DOLITICAL CONTRIBUTIONS (OTLED THAN	U DI DOGG LOANG	
16 CONTRIBUTION TOTALS	OR GUARANTE	IZED POLITICAL CONTRIBUTIONS(OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 250.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 9,405.00
EXPENDITURE TOTALS	`	IZED POLITICAL EXPENDITURES	<u> </u>	\$ 90.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 6,118.42
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 4,127.75
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.		
		Ms. Bre	ndetta Anthony Scot	t
			Candidate or Officeho	
AFFIX NOT	TARY STAMP / SEAL AB	OVE		
Sworn to and subsc	ribed before me, by the s	aid	, this the	day
of	, 20, to c	ertify which, witness my hand and seal of office.		
Signature of offic	er administering oath	Printed name of officer administering oath	Title of office	er administering oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

		C	OVER SHEET	PG 3 3 of 29
18 FILER NA Scott, Bro	ME endetta Anthony (Ms.)	19 Filer ID 00088276	(Ethics Commission	n Filers)
	E SUBTOTALS SCHEDULE		SUBTOTAL AI	MOUNT
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	9,405.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	4,428.63
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$	
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	484.96
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	1,204.83
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) SCHEDULE E(J): LOANS (JUDICIAL) SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION SCHEDULE F2: UNPAID INCURRED OBLIGATIONS SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	ONS OF C/OH ONS	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	4,428.

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 1/10 Rpt: 4/29
2	FILER NAME Scott, Brend	etta Anthony (Ms.)			3	Filer ID (Ethics Commission Filers) 00088276
4	Date 05/20/2024	5 Full name of contributor Agosto, Bernardino6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$1,000.00
		Houston, TX 77034				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Managing Partner		
10		employer/law firm atkins Nichols Agosto Aziz &	Stogner	11 Law firm of contributor's sp	oous	e (if any)
12		s a child, law firm of parent(s) (if				
		o a oa, iaw o. pa. o(o) (ca.,y/			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/01/2024	Anthony, Clarence				\$50.00
		Contributor address; City; Significant Contributor Contributor address; City; Significant Contributor Con	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	retired	iniopai Godapation		retired		
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
	N/A	1111 6 6 (1)				
	If contributor is	s a child, law firm of parent(s) (if	any)			
=	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	03/04/2024	Anthony, Mary	_			\$130.00
		Contributor address; City; Greenwood, MS 38930	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Certified Nur			Certified Nurse's Aid		
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
		ursing & Rehabilitation Home	e			· · //
	If contributor is	s a child, law firm of parent(s) (if	any)	•		

	MONET	ARY POLITICAL CO	ONTRIBUTIO	ONS		SCHEDULE A	\(J)1
	The Instru	ction Guide explains how to	o complete this f	orm.		ges Schedule A(J)1: 10 Rpt: 5/29	
2	FILER NAME Scott, Brend	etta Anthony (Ms.)			3 Filer ID 000882	(Ethics Commissio	n Filers)
4	Date 05/13/2024	5 Full name of contributor Ballases, Thomas6 Contributor address; City; State Houston, TX 77055	out-of-state PAC (ID#:_ e; Zip Code		7 Amount	of Contribution (\$)	\$250.00
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	1		
	Attorney			Attorney			
10	Contributor's of Hoover Slov	employer/law firm acek LLP		11 Law firm of contributor's sp	ouse (if any))	
12	If contributor i	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount	of Contribution (\$)	
	05/01/2024	Barr, Willie & Ruby Contributor address; City; State Greenwood, MS 38930	-			(,)	\$350.00
	Contributor's I	Principal Occupation		Contributor's Job Title			
	retired	Tilicipal Occupation		retired			
		employer/law firm		Law firm of contributor's sp	nouse (if any)		
	N/A	Simple year, law iiiiii		East min of contributor of op	oude (ii diiy)		
	If contributor i	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount	of Contribution (\$)	
	03/04/2024	Beck, Terrell Contributor address; City; State Mesquite, TX 75181	e; Zip Code				\$100.00
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Shoreman			E03			
		employer/law firm		Law firm of contributor's sp	ouse (if any)		
	Liberty Ener						
	If contributor i	s a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 3/10 Rpt: 6/29
2	FILER NAME Scott, Brend	etta Anthony (Ms.)			3	Filer ID (Ethics Commission Filers) 00088276
4	Date 05/01/2024	5 Full name of contributorBrewer, Leah6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$150.00
		Greenwood, MS 38930				
8		Principal Occupation		9 Contributor's Job Title		
_	Law Clerkl			Law Clerk		
10	Contributor's 6 Sanders Lav	employer/law firm v Firm		11 Law firm of contributor's sp	oous	se (If any)
12		s a child, law firm of parent(s) (i	f any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	03/04/2024	Cates, Anita Contributor address; City;	State; Zip Code			\$100.00
	Contributor's I	Lancaster, TX 75146 Principal Occupation		Contributor's Job Title	<u> </u>	
	Case Manag			Case Manager		
-		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	FCI Seagovi	lle				
	If contributor is	s a child, law firm of parent(s) (i	f any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	03/09/2024	Catmull, Anne	_			\$1,000.00
		Contributor address; City; Houston, TX 77027	State; Zip Code			
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	O'Connor W	echsler PLLC				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 4/10 Rpt: 7/29
2	FILER NAME Scott, Brend	letta Anthony (Ms.)		3 Filer ID (Ethics Commission Filers) 00088276
4	Date 02/27/2024	 5 Full name of contributor out-of-state PAC (ID# Clark, Priscilla (Dr.) 6 Contributor address; City; State; Zip Code Fort Washington, MD 20744 	:)	7 Amount of Contribution (\$) \$150.00
8	Contributor's F	I Principal Occupation	9 Contributor's Job Title	
	Federal Exe		Federal Executive	
10		employer/law firm of Housing and Urban Development	11 Law firm of contributor's sp	ouse (if any)
12		s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor ut-of-state PAC (ID#	:)	Amount of Contribution (\$)
	03/05/2024	Edwards, Chiquita Contributor address; City; State; Zip Code Cypress, TX 77433		\$25.00
	Contributor's F	I Principal Occupation	Contributor's Job Title	
	Certified Nur	rse's Aid	Certified Nurse's Aid	
	Contributor's	employer/law firm	Law firm of contributor's sp	ouse (if any)
	Star of Texa	s Hospice		
	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor ut-of-state PAC (ID#	:)	Amount of Contribution (\$)
	05/28/2024	Ganucheau, Thomas Contributor address; City; State; Zip Code Houston, TX 77010		\$500.00
	Contributor's F	Principal Occupation	Contributor's Job Title	
	Attorney		Attorney	
		employer/law firm	Law firm of contributor's sp	ouse (if any)
	Beck Redde	n LLP		
	If contributor is	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 5/10 Rpt: 8/29
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Scott, Brend	letta Anthony (Ms.)		00088276
4	Date	5 Full name of contributor out-of-state PAC (ID#:_		7 Amount of Contribution (\$)
	03/05/2024	Gaston, Cozette (Dr.)		\$150.00
		6 Contributor address; City; State; Zip Code		
		Richmond, TX 77469		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
	Principal		Principal	
10		employer/law firm	11 Law firm of contributor's s	pouse (if any)
	Fort Bend IS	SD		
12	! If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor)	Amount of Contribution (\$)
	05/01/2024	Gilbert, Gwen		\$100.00
		Contributor address; City; State; Zip Code		"
		Greenwood, MS 38930		
	Contributor's	I Principal Occupation	Contributor's Job Title	
	Overnight S		Overnight Stocker	
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
	Walmart			
	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of Contribution (\$)
	05/13/2024	Hackett, Tokay		\$100.00
		Contributor address; City; State; Zip Code		"
		Upper Marlboro, MD 20792		
	Contributor's	Principal Occupation	Contributor's Job Title	1
		ciate Counsel	Senior Associate Coun	sel
-	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
		r, Navy Installations Command		
		s a child, law firm of parent(s) (if any)		
H				

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 6/10 Rpt: 9/29
2	FILER NAME Scott, Brend	etta Anthony (Ms.)			3	Filer ID (Ethics Commission Filers) 00088276
4	Date 06/21/2024	5 Full name of contributor Hughes Watters & Aska6 Contributor address; City;			7	Amount of Contribution (\$) \$1,000.00
		Houston, TX 77002				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date 03/04/2024	Full name of contributor Jack, Ta-Tanaisha Contributor address; City;	out-of-state PAC (ID#:_			Amount of Contribution (\$) \$100.00
		Houston, TX 77002				
		Principal Occupation		Contributor's Job Title		
		Qualifications Specialist		Operations Qualification		<u> </u>
	Kinder Morg	employer/law firm		Law firm of contributor's sp	oous	se (IT any)
		s a child, law firm of parent(s) (i	f any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:	`	_	Amount of Contribution (\$)
	03/04/2024	Jeems, Latoya Contributor address; City; Cordova, TN 38018	<u> </u>		•	\$200.00
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Principal			Principal		
		employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Coleman Ele					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 7/10 Rpt: 10/29
2	FILER NAME Scott, Brend	etta Anthony (Ms.)			3	Filer ID (Ethics Commission Filers) 00088276
4	Date 05/01/2024	5 Full name of contributor Jeems, Robert & Nell6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$200.00
		Greenwood, MS 38930				
8		Principal Occupation		9 Contributor's Job Title		
	Restaurant (Restaurant Owners		
10	Contributor's of Jeems Dine	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if	any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	05/03/2024	Kherkher, Steve Contributor address; City;	<u> </u>			\$1,000.00
		Houston, TX 77098				
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Kherkher Ga					
	If contributor is	s a child, law firm of parent(s) (i	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	04/17/2024	McGee, Andrew	_			\$50.00
		Contributor address; City; Houston, TX 77015	State; Zip Code		•	
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Attorney	iniopai Georpaien		Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Law Office o	f Andrew G. McGee				
	If contributor is	s a child, law firm of parent(s) (if	any)	•		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 8/10 Rpt: 11/29
2	FILER NAME Scott, Brend	etta Anthony (Ms.)			3	Filer ID (Ethics Commission Filers) 00088276
4	Date 05/01/2024	5 Full name of contributor Phillips, Annie6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$50.00
		Greenwood, MS 38930				
8		Principal Occupation		9 Contributor's Job Title		
_	retired			retired		
10	N/A	employer/law firm		11 Law firm of contributor's sp	oous	se (If any)
12	2 If contributor is	s a child, law firm of parent(s) (if	any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	03/04/2024	Sanders, Neeka (Dr.) Contributor address; City;	State; Zip Code			\$250.00
		Tupelo, MS 38801				
		Principal Occupation		Contributor's Job Title		
	Physician			Physician		
		employer/law firm nic for Women		Law firm of contributor's sp	oous	se (if any)
_		s a child, law firm of parent(s) (i	· anu)			
	ii continuator i	s a cilliu, law littii oi paretii(s) (ii	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	03/04/2024	Sanders, Neysha	_			\$250.00
		Contributor address; City; Greenwood, MS 38930	State; Zip Code			
_	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Sanders Lav	v Firm				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 9/10 Rpt: 12/29
2	FILER NAME Scott, Brend	etta Anthony (Ms.)			3	Filer ID (Ethics Commission Filers) 00088276
4	Date 05/01/2024	5 Full name of contributor Scott, Brendetta6 Contributor address; City;	out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$500.00
		Missouri City, TX 77459				
8		Principal Occupation		9 Contributor's Job Title		
L	Attorney			Attorney		
10		employer/law firm / Scott Law Firm, PLLC		11 Law firm of contributor's sp	oous	se (If any)
12		s a child, law firm of parent(s) (i	f any)	<u> </u>		
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/07/2024	Sorrels, Randall Contributor address; City;	State; Zip Code			\$500.00
	Contributor's I	Houston, TX 77007 Principal Occupation		Contributor's Job Title		
	Lawyer	- ппстрат Оссирацоп		Lawyer		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Sorrels Law					
	If contributor is	s a child, law firm of parent(s) (if	f any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/06/2024	Torrence, Travis Contributor address; City; Houston, TX 77018	State; Zip Code			\$250.00
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Lawyer			Lawyer		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Shell USA, I	nc.				
	If contributor is	s a child, law firm of parent(s) (if	f any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this f	form.	1	Total pages Schedule A(J)1: Sch: 10/10 Rpt: 13/29
2	FILER NAME Scott, Brend	etta Anthony (Ms.)			3	Filer ID (Ethics Commission Filers) 00088276
4	Date 06/14/2024	5 Full name of contributorWare, Jackson, Lee, O'l6 Contributor address; City;		,	7	Amount of Contribution (\$) \$500.00
		Houston, TX 77019				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	e (if any)
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date 02/29/2024	Full name of contributor Wong, Michael Contributor address; City;	out-of-state PAC (ID#:			Amount of Contribution (\$) \$100.00
		Houston, TX 77071		1		
		Principal Occupation		Contributor's Job Title Associate Attorney		
	Heard & Me	employer/law firm dack, P.C. s a child, law firm of parent(s) (i	f any)	Law firm of contributor's sp	oous	e (if any)
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Т	Amount of Contribution (\$)
	03/04/2024	Woods, Felicia Contributor address; City; Cypress, TX 77433	<u> </u>			\$50.00
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Nurse			Charge Nurse		
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
	The Lev at T	own Park s a child, law firm of parent(s) (i	f any)			

SCHEDULE F1

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/13 Rpt: 14/29	Scott, Brendetta Anthony (Ms.) 00088276
4	Date	5 Payee name
	03/04/2024	AB Canvassing Incorporated
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$541.00	8331 Northern St.
		Houston, TX 77071
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense
	LXI ENDITORE	Check if Austin, TX, officeholder living expense
		Poll workers
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/04/2024	Allied Signs
	Amount (\$)	Payee address; City; State; Zip Code
	\$148.84	6820 Harwin Dr.
	42 1010 1	3323 T.M. T.I. 21.
		Houston, TV 7702C
		Houston, TX 77036
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		signs and push cards
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/14/2024	Allied Signs
	Amount (\$)	Payee address; City; State; Zip Code
	\$189.44	6820 Harwin Dr.
		Houston, TX 77036
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		campaign business cards
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Superiorder to belieff 6/01	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/13 Rpt: 15/29	Scott, Brendetta Anthony (Ms.) 00088276
4	Date	5 Payee name
	04/18/2024	Avenida North Garage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$18.00	1001 Avenida De Las Americas
		Houston, TX 77010
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 parking fee for HLA GALA
		parking rector TEX ONEX
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	the state of the s
	Date	Payee name
	06/17/2024	B's Wine Bar
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.24	8027 Hwy 6, Ste. 100
		Missouri City, TX 77459
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Dinner at new Ft. Bend County Democratic Party
		Chair's Celebration
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
	·	
	Date	Payee name
	03/04/2024	Blair, Javon
	Amount (\$)	Payee address; City; State; Zip Code
	\$27.00	1000 Louisiana St., #58
		Houston, TX 77002
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Food for Poll Workers
		Food for Foll Workers
	Complete ONLY if direct	Constitute (Office helds
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 3/13 Rpt: 16/29	Scott, Brendetta Anthony (Ms.) 00088276
4	Date	5 Payee name
	03/19/2024	Block 142
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.00	Block 142
		Houston, TX 77002
8	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 Parking fee
		raiking lee
<u> </u>	0 1. 0	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experience to benefit of or	
	Date	Payee name
	06/08/2024	Cheesecake Factory
	Amount (\$)	Payee address; City; State; Zip Code
	\$33.06	1450 W. Bay Area Blvd.
	·	
		Friendswood, TX 77546
	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
		Campaign Lunch Meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiantare to benefit of er	
	Date	Payee name
	03/22/2024	Cool Running Jamaican Grill
	Amount (\$)	Payee address; City; State; Zip Code
	\$67.91	8270 W. Bellfort Ave.
		Houston, TX 77071
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Food for Campaign Meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit C/Of	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com 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		
	Credit Card F dyment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME3 Filer ID(Ethics Commission Filers)	
	Sch: 4/13 Rpt: 17/29	Scott, Brendetta Anthony (Ms.) 00088276	
4	Date	5 Payee name	
	04/06/2024	Croffie, Brandi	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$125.00	5051 Westheimer, Ste. 1100	
		Houston, TX 77056	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Event Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Purchased HLA GALA ticket from Brandi Croffie,	
		who could not attend.	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	1	
	Date	Payee name	
	03/22/2024	Day 6 Coffee	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$9.26	910 Prairie St., Ste. 100	
		Houston, TX 77002	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Breakfast Meeting regarding Campaign	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	1	
	Date	Payee name	
	04/04/2024	De Lunas, Carloy (Mr.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$70.00	25 Dilao	
		Batangas 4213 Philippines	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Advertising Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		website updates and social media updates	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experiencies to benefit C/OI	<u> </u>	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political 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 Cabadula F1:	2 Files ID MAME	rc)
1	Total pages Schedule F1: Sch: 5/13 Rpt: 18/29	2 FILER NAME Scott, Brendetta Anthony (Ms.) 3 Filer ID (Ethics Commission Filer 00088276	5)
4	Date	5 Payee name	
	06/19/2024	Fish City Grill	
6	Amount (\$) \$55.42	7 Payee address; City; State; Zip Code 15980 City Walk	
		Sugar Land, TX 77479	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense	
	EXI ENDITORE	Check if Austin, TX, officeholder living expense	
		Campaign Lunch Meeting	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	05/02/2024	Givebutter, Inc.	
		<u> </u>	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$108.30	2810 N. Church St., #53748	
		Wilmington, DE 19802	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Event Expense	
	EXI ENDITORE	Check if Austin, TX, officeholder living expense	
		Angels Surviving Cancer, Inc. 10th Annual Praye Breakfast	r
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	03/22/2024	Godaddy	
	0012212024		
	Amount (\$)	Payee address; City; State; Zip Code	
	\$24.51	2150 E. Warner Rd	
		Tempe, AZ 85284	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Fees Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Campaign Email	
\vdash	Complete ONLY if alian -+	Condidate/Officeholder name Office pought	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experiorare 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

	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: 6/13 Rpt: 19/29	Scott, Brendetta Anthony (Ms.) 00088276
4	Date	5 Payee name
	04/20/2024	Godaddy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$24.51	2150 E. Warner Rd
		Tempe, AZ 85284
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign email
		Campaigh omai
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Data	
	Date	Payee name
	05/22/2024	Godaddy
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.51	2150 E. Warner Rd
		Tempe, AZ 85284
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Compaign Fmail
		Campaign Email
	Compulate ONLY if direct	Condidate/Officeholder name Office sought Office hold
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/22/2024	Godaddy
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.51	2150 E. Warner Rd
		Tempe, AZ 85284
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Campaign email
	Operation Of the Control of the Cont	Open Highest (Office health an arms)
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Oriana.o to borioni O/Oi	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Leg	t/Awards/Memorials Expense gal Services ne Instruction Guide explai		vages/	Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)	
1	Total pages Schodule E1:		· ·		•	-	2	Filer ID	(Ethics Commission Fi	ilore)
_	Total pages Schedule F1:		tto Anthony (NAc)						(Ethics Commission Fi	iicis)
	Sch: 7/13 Rpt: 20/29	Scott, Brender	ta Anthony (Ms.)					00088276		
4	Date	Payee name								
	05/31/2024	Gray, Trina								
6	Amount (\$)	7 Payee address;	City; Sta	ate; Zip Co	nde					
٠	\$294.66	229 W. 25th S	•	ate, zip oo	uc					
	Φ294.00	229 W. 25th 3	ot.							
		Houston, TX 7	7008							
8	PURPOSE	(a) Category (soo)	Categories listed at the top of this	echodulo)	(b)	Description				
	OF	Consulting Ex		Scriedule)		·	outsio	de of Texas. Com	plete Schedule T.	
	EXPENDITURE	Consuming Ex	perioc			Check if Austin,	TX,	officeholder living	g expense	
						payment to ca	amp	oaign fundra	aiser	
a	Complete ONLY if direct	Candidate/Officel	holder name	Office sou	aht			Office he	ald	
9	expenditure to benefit C/OI	Candidate/Officer	iolder name	Office 30u	grit			Office III	siu	
	· 									
	Date	Payee name								
	05/14/2024	Houston Bar A	Association							
	Amount (\$)	Payee address;	City; Sta	ate; Zip Co	de					
	\$31.20	1111 Bagby S	t FLB 200							
	401.20	TITI Dagsy C	, . 25 200							
		Houston, TX 7	7002							
	PURPOSE	(a) Category (See (Categories listed at the top of this	schedule)	(b)	Description				
	OF EXPENDITURE	Event Expens				Check if travel of	outsio	de of Texas. Com	plete Schedule T.	
	LAFLINDITORL					—		officeholder living		
						HBA's DEI 20)24	Summer A	ssociate Luncheon	
	Complete ONLY if direct	Candidate/Officel	holder name	Office sou	ght			Office h	eld	
	expenditure to benefit C/OI									
	Date	Payee name								
	05/21/2024	Houston Bar A	\ccociation							
	Amount (\$)	Payee address;	•	ate; Zip Co	de					
	\$160.00	1111 Bagby S	t., FLB 200							
		Houston, TX 7	77002							
	PURPOSE				(h)	Description				
	OF		Categories listed at the top of this	schedule)	(0)	Description Check if travel of	nutsir	de of Teyas, Com	plete Schedule T.	
	EXPENDITURE	Event Expens	е					officeholder living		
						HBA Annual [, олронов	
	Operation ONE VIII II	0	h - I - I	04.	la.i			0‴ :	-1-1	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officel	noluer name	Office sou	gnt			Office h	eiu	
										70 - 1 - 0

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

	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: 8/13 Rpt: 21/29	Scott, Brendetta Anthony (Ms.) 00088276
4	Date	5 Payee name
	03/26/2024	LA Crawfish
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$69.72	3823 FM 1092
		Missouri City, TX 77459
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Food for Campaign Meeting
		1 ood for Campaigh Weeting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
٥	expenditure to benefit C/O	
_	Data	B
	Date	Payee name
	03/23/2024	Liberty Kitchen
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.78	4224 San Felipe St.
		Houston, TX 77027
	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
		Campaign - Meet and Greet Brunch with other Candidates
	Complete ONLY if direct	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	03/21/2024	On Street
	Amount (\$)	Payee address; City; State; Zip Code
	\$3.90	On Street
		Houston, TX 77002
	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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Parking fee
	Operation ONLY if allowed	Our distance (Office health an array of the constitution of the co
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
Ļ	=	The Instruction Guide explains how to complete this form.	,
1	Total pages Schedule F1:		ers)
	Sch: 9/13 Rpt: 22/29	Scott, Brendetta Anthony (Ms.) 00088276	
4	Date	5 Payee name	
L	06/11/2024	Patel, William	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$100.00	2319 McClendon Street	
		Houston, TX 77030	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Candidate/Officeholder/Political Committee	
		campaign calendaring	
L			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	DH	
	Date	Payee name	
	05/13/2024	Run Sister Run Political Action Committee	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$200.00	P.O. Box 66470	
		Houston, TX 77266	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if Austin TV, office helder/Political Compressions	
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	ner
		contribution toward campaigning for the Novemb)CI
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	•	
 	Data		
	Date	Payee name	
	05/23/2024	Southwest Democrats	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.00	P.O. Box 2053	
		Houston, TX 77402-2053	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
		Contribution to the Southwest Democrats	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	Complete ONLY if direct expenditure to benefit C/OI	U	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/13 Rpt: 23/29	Scott, Brendetta Anthony (Ms.) 00088276
4	Date	5 Payee name
	06/14/2024	Sugar's Restaurant
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$62.24	3424 FM 1092 Rd.
		Missouri City, TX 77459
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Dinner at Ft. Bend County Democratic Party Chair's
		Farewell Party
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Data	Para a same
	Date	Payee name
	04/01/2024	TMSL Crawfish and Fish Boil
	Amount (\$)	Payee address; City; State; Zip Code
	\$70.00	3100 Cleburne Street
		Houston, TX 77004
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Entry Fee - Campaigning
		Littly i de - Campaigning
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name TSU Foundation
	05/08/2024	
	Amount (\$)	Payee address; City; State; Zip Code
	\$750.00	3100 Cleburne Street, Ste. 302A
		Houston, TX 77004
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Table at the TSU's Honor College Annual Fundraiser
		Event
_	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 Legal 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) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/13 Rpt: 24/29	Scott, Brendetta Anthony (Ms.) 00088276
4	Date	5 Payee name
	05/21/2024	TSU Foundation
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	3100 Cleburne Street, Ste. 302A
		Houston, TX 77004
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Additional Ticket for another seat at the table at
		TSU's Honor College Annual Fundraiser Event
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/28/2024	Taste Kitchen
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.93	420 Main Street
		Houston, TX 77002
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Food for Campaign Meeting
		1 ood for Campaign Weeting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	03/05/2024	Texas Democratic Women of Galveston County Annual Dinner
\vdash	Amount (\$)	Payee address; City; State; Zip Code
	\$30.00	1201 Newport Blvd.
	Φ30.00	1201 Newport Bivu.
		League City, TX 77573
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Annual Dinner Meeting
		Aimaa Diine Meeting
	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
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	,
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission	on Filers)
	Sch: 12/13 Rpt: 25/29	Scott, Brendetta Anthony (Ms.) 00088276	
4	Date	5 Payee name	
	05/17/2024	Texas Gulf Coast Area Labor Federation AFL- CIO	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$500.00	2506 Sutherland St.	
	1		
		Houston, TX 77023	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF 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	
	1	Candidate/Officenoider/Political Committee 2024 Working Families Awards Celebration	Banquet
	1		2494.01
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
ľ	expenditure to benefit C/O		
_	Data	T. Pausa annua	
	Date 06/24/2024	Payee name USPS Post Office	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$71.00	1902 Texas Pkwy	
	!		
	!	Missouri City, TX 77489	
	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	•
	1	fee for post office box for campaign address	5
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·	
	Date	Payee name	
	04/06/2024	University of Houston Law Center	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.00	4170 Martin Luther King Blvd.	
	!		
	!	Houston, TX 77204	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
	EXPENDITORE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	D.C.
	!	Donation made to U of H during Bollywood Gala	Bling
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
	experientare to benefit over	<u></u>	

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 com	ple	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 13/13 Rpt: 26/29	Scott, Brendetta Anthony (Ms.)		00088276
4	Date	5 Payee name		·
	04/15/2024	Upper Kirby		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
	\$3.00	Upper Kirby		
		Houston, TX 77005		
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.
	LAPENDITORE			Check if Austin, TX, officeholder living expense
				Parking Fee
_	Opening ONLY if allowed	Out lide to 10 ff and a li		Office held
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt	Office held
	Date	Payee name		
	06/06/2024	Walker @ M Houston, Texas		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$25.00	1777 Walker St.		
		Houston, TX 77010		
	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
				parking fee for HBA's DEI 2024 Summer Associate
				Luncheon
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	06/15/2024	Walmart		
	Amount (\$)	Payee address; City; State; Zip Code	<u>—</u>	
	\$51.69	11210 W. Airport Blvd.		
		·		
		Stafford, TX 77477		
	PURPOSE		h)	Description
	OF	candy and water for Juneteenth Parade	-,	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				candy and water for Juneteenth Parade
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	ht	Office held
	parameter administration of the			

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		rage Expense s/Memorials Expense	Office Overhead/Rental Expense T Polling Expense T Printing Expense T	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District DTHER (enter a category not listed above)		
				low to complete this form.	(,	
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commissio	n Filers)	
	Sch: 1/1 Rpt: 27/29	Scott, Brendetta Ar	thony (Ms.)		00088276		
4	CREDIT CARD ISSUER		ncial institution al One	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDITORNO	 \$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 04/05/2024 04/12/2024	er Paid		
		\$484.96	02/28/2024				
7	PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code	
		Allied Signs		6820 Harwin Dr.			
				Houston, TX 77036			
8	PURPOSE OF	(a) Category		(b) Description			
	EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	4x4 Campaign Signs			
	X Political						
	Non-Political	` _	of Texas. Complete Schedule	<u> </u>	, officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE **G**

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Co	mmittee Legal Services	Expense morials Expense ion Guide explains	Office Over Polling Ex Printing E Salaries/V	xpense Vages/Contract Labor	Trar Trav Trav	citation/Printinating Expense resportation Equipment & Relativel in District vel Out of District HER (enter a category not liste	
1	Total pages Schedule G:	2	FILER NAME				3 File	er ID (Ethics Commis	sion Filers)
	Sch: 1/2 Rpt: 28/29		Scott, Brendetta Antho	ny (Ms.)			000	088276	,
4	Date	5	Payee name				<u> </u>		
	03/02/2024		Allied Signs						
6	Amount (\$) \$94.72	7	Payee address; City; 6820 Harwin Dr.	State	; Zip Co	ode			
	Reimbursement from political contributions intended		Houston, TX 77036						
8	PURPOSE OF	(a)	Category (See Categories lis	ted at the top of this sch	nedule)	(b) Description	=	if travel outside of Texas. Com	
	EXPENDITURE		Advertising Expense			L		if Austin, TX, officeholder living	expense
						push cards for p	oll work	ers	
Ļ	0 1 0 0 1 1 1 1 1	Ĺ	"			0"		0.00	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cai	ndidate/Officeholder name			Office sought		Office held	
	Date		Payee name						
	03/04/2024		Allied Signs						
	Amount (\$)		Payee address; City;	State	; Zip Co	ode			
	\$148.84		6820 Harwin Dr.						
	Reimbursement from political contributions intended		Houston, TX 77036						
	PURPOSE		Category (See Categories lis	ted at the top of this sch	nedule)	Description	Check i	if travel outside of Texas. Com	plete Schedule T.
	OF EXPENDITURE		Advertising Expense				Check i	if Austin, TX, officeholder living	expense
						signs and push	cards		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cai	ndidate/Officeholder name			Office sought		Office held	
	Date		Payee name						
	03/01/2024		Dupree, Evelyn						
	Amount (\$)		Payee address; City;	State	; Zip Co	ode			
	\$300.00		3901 Emancipation						
	Reimbursement from political contributions intended		Houston, TX 77004						
	PURPOSE OF		Category (See Categories lis	ted at the top of this sch	nedule)	Description	=	if travel outside of Texas. Com	
	EXPENDITURE		Polling Expense			L	Check i	if Austin, TX, officeholder living	expense
						poll workers			
	Complete ONLY if direct expenditure to benefit C/OH	Cai	ndidate/Officeholder name			Office sought		Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form			Travel in District Travel Out of District OTHER (enter a category not listed above)			
The Instruction Guide explains how to complete this form.									
1	Total pages Schedule G:	2 FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 2/2 Rpt: 29/29	Scott, Bren	detta Anthony (Ms.)				000882	76	
4	Date	5 Payee name				•			
	03/02/2024	Dupree, Ev	elyn						
6	Amount (\$)	7 Payee addre	ss; City; State;	Zip Co	ode				
	\$380.50	3901 Emar		•					
	Reimbursement from								
	political contributions intended	Houston, T.	X 77004						
8	PURPOSE	(a) Category (s	ee Categories listed at the top of this sche	edule)	(b) Description	Che	eck if travel	outside of Texas. Complete Schedule T.	
ľ	OF	1		edule)	(b) Description	=		n, TX, officeholder living expense	
	EXPENDITURE	Polling Exp	CIISC		Poll workers	_			
					on workers				
_	Complete ONLY if direct	Candidate/Office	holder name		Office sought			Office held	
9	expenditure to benefit	Candidate/Office	noider name		Office sought			Office field	
	C/OH								
	Date	Payee name							
	02/28/2024	Mitchell, Jo							
				7:n Ca	- d-				
	Amount (\$)	Payee address; City; State; Zip Code							
	\$50.00	10315 W. <i>A</i>	Airport Biva.						
	Reimbursement from political contributions								
	intended	Stafford, T	K 77477						
	PURPOSE	Category (S	ee Categories listed at the top of this sch	edule)	Description [Che	eck if travel	outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Event Expe	ense			Che	eck if Austir	n, TX, officeholder living expense	
	space for campaigning at Event						vent		
	Complete ONLY if direct	Candidate/Office	holder name		Office sought			Office held	
	expenditure to benefit C/OH								
		•							
	Date	Payee name							
	02/28/2024	Texas Victo	ory Consulting						
	Amount (\$)	Payee addre	ss; City; State;	Zip Co	ode				
	\$230.77	1034 Saulir	ner St.						
	Reimbursement from								
	political contributions intended	Houston, T.	X 77019						
	PURPOSE	Category (S	ee Categories listed at the top of this scho	edule)	Description	Che	eck if travel	outside of Texas. Complete Schedule T.	
	OF	Advertising	Expense		Ī	Che	eck if Austir	n, TX, officeholder living expense	
	EXPENDITURE	_			mass text messa	ages	to vote	rs	
	Complete ONLY if direct	<u>I</u> Candidate/Office	holder name		Office sought			Office held	
	expenditure to benefit				Č				
	C/OH								
l									