

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00087934	2 Total pages filed: 9		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Jai L.	MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/15/2024	
	NICKNAME	LAST Daggett	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 11601 Shadowcreek Parkway Suite 111-150 Pearland, TX 77584		ZIP CODE	Date Hand-delivered or Date Postmarked	
				Receipt #	
				Amount	
				Date Processed	
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Katie	MI		
	NICKNAME	LAST Daggett	SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 11601 Shadow Creek Parkway Pearland, TX 77584		APT / SUITE #;	CITY;	
			STATE;	ZIP CODE	
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	(832)	524-2969			
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)				
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month	Day	Year	THROUGH	
	01/01/2024			06/30/2024	
10 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff
	11/05/2024			<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any) None Brazoria		12 OFFICE SOUGHT (if known) State Representative District 25		

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
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13 C / OH NAME Daggett, Jai L. (Mr.)	14 Filer ID (Ethics Commission Filers) 00087934
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME <hr/> COMMITTEE ADDRESS <hr/> COMMITTEE CAMPAIGN TREASURER NAME <hr/> COMMITTEE CAMPAIGN TREASURER ADDRESS <hr/>

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	3,220.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	1,106.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	3,220.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	5,000.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Jai L. Daggett

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Daggett, Jai L. (Mr.)	19 Filer ID (Ethics Commission Filers) 00087934
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20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,220.00
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 5,000.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,106.00
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/4 Rpt: 4/9
2 FILER NAME Daggett, Jai L. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087934
4 Date 05/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ACTBLUE Texas <hr/> 6 Contributor address; City; State; Zip Code Somerville , MA 02144	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baird, Stephanie <hr/> Contributor address; City; State; Zip Code Manvel, TX 77578	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Dexter <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burris, Tarah <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davison, Thomas <hr/> Contributor address; City; State; Zip Code Fredricksburg, TX 78624	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/4 Rpt: 5/9
2 FILER NAME Daggett, Jai L. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087934
4 Date 02/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, John <hr/> 6 Contributor address; City; State; Zip Code Angleton, TX 77515	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Higgins, Joe <hr/> Contributor address; City; State; Zip Code Tuscon, AZ 85718	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoskins, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78761	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Sean <hr/> Contributor address; City; State; Zip Code Elk Grove, CA 95758	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Phillip <hr/> Contributor address; City; State; Zip Code Fulshear, TX 77441	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/4 Rpt: 6/9
2 FILER NAME Daggett, Jai L. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087934
4 Date 03/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keep AI Green in Congress	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Houston, TX 77027		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lingard, Brian	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Houston, TX 77006		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Mike (Dr.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston , TX 77025		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillon, Ken	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Houston, TX 77008		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norris, Steve	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Pearland, TX 77584		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/4 Rpt: 7/9
2 FILER NAME Daggett, Jai L. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087934
4 Date 03/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Ronald (Rep.) <hr/> 6 Contributor address; City; State; Zip Code Missouri City , TX 77459	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Russell <hr/> Contributor address; City; State; Zip Code The woodlands, TX 77380	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yarbrough, Jack <hr/> Contributor address; City; State; Zip Code Mountain Home, TX 78058	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 8/9
2 FILER NAME Daggett, Jai L. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087934
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 05/01/2024	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Daggett, Jai	9 Loan Amount (\$) \$5,000.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code Pearland, TX 77584	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions) CEO		13 Employer (See Instructions) Daggett Consulting Group
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/1 Rpt: 9/9	2 FILER NAME Daggett, Jai L. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087934
4 Date 02/09/2024	5 Payee name Alvin ISD	
6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 301 E. House St. Alvin, TX 77581	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tee Shirt Advertising
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/06/2024	Payee name Hilton Garden INN	
Amount (\$) \$503.00	Payee address; City; State; Zip Code 111 West University Ave El Paso, TX 79912	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging for convention
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/22/2024	Payee name Virtuoso Graphics	
Amount (\$) \$303.00	Payee address; City; State; Zip Code 4703 Richmond Ave Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held