JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to c	complete this form.	1 Filer ID (Ethics Comm 00036281	,	2 Total pages	filed: 46
3 CANDIDATE /	MS / MRS / MR	FIRST	•	MI		USE ONLY
OFFICEHOLDER NAME	The Honorable	Richard F.			Date Received	
					ELECTRONIC	CALLY FILED
	NICKNAME	LAST		SUFFIX	10/07/2024	
		Hightower		JULLIV		
4 CANDIDATE /	ADDRESS / PO BOX;	APT / SUITE #; CI	TY;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING					Receipt #	Amount
ADDRESS	REDACTED PER	254.0313, GOV'T	CODE			
Change of Address					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER NAME	Mr.	Allen R.				
	NICKNAME	LAST			SUFFIX	
		Hightower			Jr.	
		rightower			U 1.	
6 CAMPAIGN TREASURER	STREET ADDRESS (NO) PO BOX PLEASE);	AP	T / SUITE #; CITY	; Sī	TATE; ZIP CODE
ADDRESS		254.0313, GOV'T	CODE			
(Residence or Business)	REDACTEDTER	234.0313, 007 1	CODL			
7 CAMPAIGN TREASURER		HONE NUMBER	EXTENSION			
PHONE	(936) 291-8337					
8 REPORT TYPE	January 15	X 30th day befo	re election	Runoff	15th day after o	ampaign treasurer
				L		fficeholder only)
	July 15	8th day before	e election	Exceeded modified reporting limit	Final Report (A	ttach C/OH-FR)
9 PERIOD	Month Day Y	ear		Month Day	Year	
COVERED	07/01/2024	Т	HROUGH	09/26/202	24	
10 ELECTION	ELECTION DAT	E		ELECTION TYPE		
		ear 🗌	Primary	Runoff	Other	
	11/05/2024		General	Special		
11 OFFICE	OFFICE HELD (if any)	•		12 OFFICE SOUGH	T (if known)	
	Court Of Appeals, Jus	tice Place 8 Distric	ct 1	Court Of Appea	ls, Justice Place	8 District 1
	I			1		
		GO	TO PAGE 2			
Forms provided by Te	exas Ethics Commission	WWW.6	ethics.state.tx.u	IS	Ver	sion V4.1.0.48da51f

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 46

I

13 C / OH NAME	Hightower, Richard F	. (The Honorable)	14 Filer ID 00036281	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without d officeholders are required to report this information	the candidate's or office	eholder's knowledge or
Additional Pages		COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
16 CONTRIBUTION TOTALS		I. IZED POLITICAL CONTRIBUTIONS(OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
			16)	\$ 43,707.00
EXPENDITURE TOTALS		PLEDGES, LOANS, OR GUARANTEES OF LOAN IZED POLITICAL EXPENDITURES	15)	\$ 150.00
TOTALS	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 62,280.34
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L	AST DAY OF THE	\$ 46,841.72
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	S OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penali true and correct and includes a under Title 15, Election Code.		
		The Honora	able Richard F. Highte	ower
		Signature o	f Candidate or Officeho	lder
AFFIX NO	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	r administering oath
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SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

3 of 46

18 FILER NAME Hightower, Richard F. (The Honorable)	19 Filer ID 00036281	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS		
NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. X SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$ 43,707.00
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	\$ 62,280.34
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$

The Instruc	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/22 Rpt: 4/46
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Hightower, R	Hightower, Richard F. (The Honorable)		00036281
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/08/2024	Ardington, Amy		\$54.00
	6 Contributor address; City; State; Zip Code		
	Bellville, TX 77418		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Retired		Retired	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	
Retired		Law Office of Thomas S	Sheffield
12 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 (\$)
09/17/2024	Arellano, Lee		\$25.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77019		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Partner	
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
Arellano & A			
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 (\$)
09/19/2024	Athari, Mohammad	/	\$5,000.00
	Contributor address; City; State; Zip Code		
	Baytown, TX 77521		
Contributor's F	Principal Occupation	Contributor's Job Title	
Neurologist	Neurologist Neurologist		
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
Athari Mohammad MD			
If contributor is a child, law firm of parent(s) (if any)			
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The Instruction Guide explains how to complete this form.	1 Total pages Schedule A(J)1: Sch: 2/22 Rpt: 5/46
2 FILER NAME Hightower, Richard F. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00036281
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$) \$25.00
Needville, TX 77461	
8 Contributor's Principal Occupation 9 Contributor's	
Travel Agent Travel Ager	
10 Contributor's employer/law firm 11 Law firm of c Frosch Travel 11	ontributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
09/18/2024 Baker, James	\$250.00
Contributor address; City; State; Zip Code	
Houston, TX 77024	
Contributor's Principal Occupation Contributor's	Job Title
Real Estate Real Estate	Agent
	ontributor's spouse (if any)
Absalom LLC	
If contributor is a child, law firm of parent(s) (if any)	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
09/01/2024 Bass, Judi	\$3.00
Contributor address; City; State; Zip Code	
Surfside Beach, TX 77541	
Contributor's Principal Occupation Contributor's	Job Title
Retired Retired	
Contributor's employer/law firm Law firm of c	ontributor's spouse (if any)
Retired	
If contributor is a child, law firm of parent(s) (if any)	
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The Instrue	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/22 Rpt: 6/46
2 FILER NAME Hightower, R	2 FILER NAME Hightower, Richard F. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036281
4 Date 08/31/2024	 5 Full name of contributor out-of-state PAC (ID#: Bayens, Carol 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$15.00
	Houston, TX 77055		
	Principal Occupation	9 Contributor's Job Title	
Not Employe		Not Employed	
10 Contributor's e		11 Law firm of contributor's sp	oouse (if any)
Not Employe			
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)
07/29/2024	Full name of contributor out-of-state PAC (ID#:_ Blue Williams, LLC)	\$1,000.00
0112012024	Contributor address; City; State; Zip Code		
	contributor address, city, state, zip code		
	Metairie, LA 70002		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
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 (\$)
09/09/2024	Broocks, Linda		\$250.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77002		
	Principal Occupation	Contributor's Job Title	
Attorney		Partner	
Contributor's employer/law firm Law firm of contributor's sp Kean Miller LLP Kean Miller LLP		oouse (if any)	
Kean Miller LLP Kean Miller LLP If contributor is a child, law firm of parent(s) (if any) If any)			
	s a child, law lifth of parent(s) (it any)		
Eorms provided	hy Texas Ethics Commission www.ethic	s state tx us	Version V4 1 0 48da51f7

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/22 Rpt: 7/46	
2 FILER NAME Hightower, Ri	2 FILER NAME Hightower, Richard F. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036281
09/26/2024	 5 Full name of contributor out-of-state PAC (ID#:) Cain, Jim 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$100.00
	Spring, TX 77379		
8 Contributor's Provide Not Employed		9 Contributor's Job Title Not Employed	
10 Contributor's er Not Employed		11 Law firm of contributor's sp	oouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)		
Date 09/26/2024	Full name of contributor out-of-state PAC (ID#:) Cormier, Konor Ontributor address; City; State; Zip Code		Amount of Contribution (\$) \$100.00
	Houston, TX 77079		
Contributor's Pi Attorney	rincipal Occupation	Contributor's Job Title Shareholder	
Contributor's employer/law firm Law firm of contributor's sp MehaffyWeber PC Law firm of contributor's sp		Law firm of contributor's sp	oouse (if any)
If contributor is	a child, law firm of parent(s) (if any)		
Date 08/31/2024	Full name of contributor out-of-state PAC (ID#:_ Daniel, Marty Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$50.00
	Houston, TX 77025		
Contributor's Pi Teacher	Contributor's Principal OccupationContributor's Job TitleTeacherTeacher		
Contributor's employer/law firm Law firm of contributor's sp Houston ISD		oouse (if any)	
If contributor is	a child, law firm of parent(s) (if any)		
	ov Texas Ethics Commission www.ethic	s.state.tx.us	Version V4.1.0.48da51f7

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/22 Rpt: 8/46
2 FILER NAME Hightower, Richard F. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036281
09/05/2024 Davis, Kathleen	D#:)	7 Amount of Contribution (\$) \$1,000.00
Houston, TX 77043		
8 Contributor's Principal Occupation	9 Contributor's Job Title	
Not Employed	Not Employed	
10 Contributor's employer/law firm	11 Law firm of contributor's sp	bouse (if any)
Not Employed		
12 If contributor is a child, law firm of parent(s) (if any)		
Date Full name of contributor out-of-state PAC (I	D#:)	Amount of Contribution (\$)
09/24/2024 DeGeer, Lynn		\$15.00
Contributor address; City; State; Zip Code		
Spring, TX 77379		
Contributor's Principal Occupation	Contributor's Job Title	
Not Employed	Not Employed	
Contributor's employer/law firm	Law firm of contributor's sp	bouse (if any)
Not Employed		
If contributor is a child, law firm of parent(s) (if any)		
Date Full name of contributor out-of-state PAC (I	D#:)	Amount of Contribution (\$)
09/17/2024 Denton, Aaron		\$250.00
Contributor address; City; State; Zip Code		
Houston, TX 77315		
Contributor's Principal Occupation	Contributor's Job Title	
Public Adjuster Public Adjuster		
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)
Denton Claims Consulting		
If contributor is a child, law firm of parent(s) (if any)		
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/22 Rpt: 9/46			
2 FILER NAME Hightower, R	2 FILER NAME Hightower, Richard F. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036281		
4 Date 08/31/2024	 5 Full name of contributorout-of-state PAC (ID#:) Dotter, Katherine 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$100.00		
	Webster, TX 77598				
	Principal Occupation	9 Contributor's Job Title			
Teacher	and a south as software	Teacher			
10 Contributor's e Clear Creek		11 Law firm of contributor's sp	Jouse (ii any)		
	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)		
09/26/2024	Eiland, Craig	/	\$250.00		
	Contributor address; City; State; Zip Code				
	Galveston, TX 77550				
Contributor's F	Principal Occupation	Contributor's Job Title			
Attorney		Partner			
	employer/law firm	Law firm of contributor's sp	bouse (if any)		
Eiland & Bon					
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 (\$)		
08/31/2024	Ellis, Donna		\$100.00		
	Contributor address; City; State; Zip Code				
	Sugar Land, TX 77498				
Contributor's F	Principal Occupation	Contributor's Job Title			
Not Employe		Not Employed			
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)			
Not Employed					
If contributor is	If contributor is a child, law firm of parent(s) (if any)				
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The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/22 Rpt: 10/46
2 FILER NAME Hightower, R	2 FILER NAME Hightower, Richard F. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036281
4 Date 08/29/2024	 5 Full name of contributor out-of-state PAC (ID#: Frels, Kelly 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$200.00
	Houston, TX 77056		
• Contributorio [Contributorio Job Titlo	
Attorney	Principal Occupation	9 Contributor's Job Title Retired	
10 Contributor's e Retired	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 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 (\$)
09/17/2024	Galloway, Connor	,	\$250.00
	Contributor address; City; State; Zip Code		
	Spring, TX 77381		
	Principal Occupation	Contributor's Job Title	
Attorney		Chief Operating Officer	
	employer/law firm	Law firm of contributor's sp	bouse (if any)
MMA Law Fi			
It 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 (\$)
09/26/2024	Gerber, Andrea		\$250.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77006	1	
	Principal Occupation	Contributor's Job Title	
Attorney Consultant			
Contributor's employer/law firm Law firm of contributor's sp Andrea Gerber Consulting		Jouse (II any)	
If contributor is a child, law firm of parent(s) (if any)			
Forms provided	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V4.1.0.48da51f7

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/22 Rpt: 11/46	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Hightower, Richard F. (The Honorable)		00036281	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
08/31/2024	Goodman, Kenneth		\$100.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77019		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Not Employe		Not Employed	
10 Contributor's e		11 Law firm of contributor's sp	oouse (if any)
Not Employe			
12 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 (\$)
09/25/2024	Graff, Hans		\$250.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77055		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Senior Attorney	
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
LeonAlcala F			
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 (\$)
08/23/2024	Gray, Cary		\$2,500.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77056		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney Partner			
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
Gray Reed			
If contributor is	s a child, law firm of parent(s) (if any)		
Forms provided	by Texas Ethics Commission www.ethio	cs.state.tx.us	Version V4.1.0.48da51f7

The Instrue	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/22 Rpt: 12/46
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date	Hightower, Richard F. (The Honorable) Date 5 Full name of contributor Out-of-state PAC (ID#:)		00036281 7 Amount of Contribution (\$)
09/03/2024	Griffis, Phil		\$250.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77058		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Attorney		Principal	
10 Contributor's e		11 Law firm of contributor's sp	oouse (if any)
Phil Griffis P			
12 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 (\$)
09/26/2024	Helmcamp, Clifford		\$100.00
	Contributor address; City; State; Zip Code		
Contributor's [Houston, TX 77098 Principal Occupation	Contributor's Job Title	
Realtor		Realtor Associate	
	employer/law firm	Law firm of contributor's sp	oouse (if any)
Greenwood	King Properties		
If contributor is	s a child, law firm of parent(s) (if any)		
Data	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)
Date 09/25/2024	Full name of contributor out-of-state PAC (ID#: Hightower, Allen)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code		
	Huntsville, TX 77340		
	Principal Occupation	Contributor's Job Title	
Retired Retired			
Contributor's employer/law firm Law firm of contributor's sp Retired		ouse (if any)	
	s a child, law firm of parent(s) (if any)		
Forme provided	hy Texas Ethics Commission www.ethic		Version V/4 1 0 48da51f7

The Instruc	tion Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 10/22 Rpt: 13/46		
2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
-	ichard F. (The Honorable)		00036281	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
08/31/2024	Hightower, Bret		\$68.00	
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77027			
	rincipal Occupation	9 Contributor's Job Title		
	velopment Director	Business Development		
10 Contributor's e		11 Law firm of contributor's sp	bouse (if any)	
	d Health System			
12 If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributor Out-of-state PAC (ID#:	١	Amount of Contribution (\$)	
07/03/2024	Horton, Janet		\$500.00	
01100/2021	Contributor address; City; State; Zip Code			
	Houston, TX 77024			
Contributor's P	rincipal Occupation	Contributor's Job Title		
Attorney		Partner		
	mployer/law firm	Law firm of contributor's sp	pouse (if any)	
Thompson &				
-	a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/16/2024	Horton, Janet		\$500.00	
	Contributor address; City; State; Zip Code			
	Houston, TX 77024			
Contributor's P	rincipal Occupation	Contributor's Job Title	•	
Attorney	Attorney Partner			
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)		
Thompson & Horton LLP				
If contributor is a child, law firm of parent(s) (if any)				
Formo providad k	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V4.1.0.48da51f7	

The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 11/22 Rpt: 14/46	
2 FILER NAME Hightower, F	2 FILER NAME Hightower, Richard F. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036281	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
09/20/2024	Hunton Andrews Kurth Texas PAC		\$2,500.00	
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77002			
8 Contributor's F	Principal Occupation	9 Contributor's Job Title		
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)	
12 If contributor is	s a child, law firm of parent(s) (if any)	1		
Date	— —)	Amount of Contribution (\$)	
08/23/2024	Husch Blackwell LLP		\$1,000.00	
	Contributor address; City; State; Zip Code			
	Houston, TX 77002			
Contributor's F	Principal Occupation	Contributor's Job Title		
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)	
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 (\$)	
09/23/2024	Jaworski, Joseph		\$250.00	
	Contributor address; City; State; Zip Code			
	Galveston, TX 77550			
Contributor's F	Principal Occupation	Contributor's Job Title		
Attorney Owner				
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)		
Joseph S. Jaworski P.C.				
If contributor is a child, law firm of parent(s) (if any)				
Forms provided	by Texas Ethics Commission www.ethic	e state ty us	Version V4 1 0 48da51f7	

The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 12/22 Rpt: 15/46
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Hightower, F	Hightower, Richard F. (The Honorable)		00036281
4 Date	5 Full name of contributor out-of-state PAC (ID#	¢:)	7 Amount of Contribution (\$)
08/31/2024	Juarez, Lois		\$50.00
	6 Contributor address; City; State; Zip Code		
	Alvin, TX 77511		
	Principal Occupation	9 Contributor's Job Title	
Accountant		Accountant	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	pouse (if any)
RGP			
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor 🛛 out-of-state PAC (ID#	t:)	Amount of Contribution (\$)
08/06/2024	Kendrick, James		\$100.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77025		
	Principal Occupation	Contributor's Job Title	
Physician		Orthopedic Surgeon	
	employer/law firm	Law firm of contributor's s	pouse (if any)
Memorial He			
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 (\$)
08/31/2024	Knauth, Ann Contributor address; City; State; Zip Code		\$24.00
	Contributor address, City, State, Zip Code		
	Richmond, TX 77469		
Contributor's F	I Principal Occupation	Contributor's Job Title	
Not Employed Not Employed			
Contributor's employer/law firm Law firm of contributor's sp		pouse (if any)	
Not Employed			
If contributor is a child, law firm of parent(s) (if any)			
Forms provided	by Texas Ethics Commission www.ethi	ics state tx us	Version V4 1 0 48da51f7

The Instruc	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 13/22 Rpt: 16/46		
2 FILER NAME Hightower, R	2 FILER NAME Hightower, Richard F. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036281	
4 Date 08/15/2024	5 Full name of contributor Out-of-state PAC (ID#:_ Krist, Kim		7 Amount of Contribution (\$) \$250.00	
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77062			
8 Contributor's P Not Employe	rincipal Occupation d	9 Contributor's Job Title Not Employed		
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	oouse (if any)	
Not Employe	d	The Krist Law Firm		
12 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 (\$)	
09/01/2024	Laser, Joel		\$24.00	
	Contributor address; City; State; Zip Code Houston, TX 77006			
	rincipal Occupation	Contributor's Job Title		
Attorney		Counsel		
Adams and F	mployer/law firm	Law firm of contributor's sp	oouse (if any)	
	a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/26/2024	Laster, Michael		\$250.00	
	Contributor address; City; State; Zip Code			
	Houston, TX 77074			
	rincipal Occupation	Contributor's Job Title		
Attorney Assistant County Attorn				
Contributor's employer/law firm Law firm of contributor's sy Harris County Attorney's Office		oouse (if any)		
If contributor is a child, law firm of parent(s) (if any)				
	a child, law infit of parent(s) (if any)			
Forme provided b	oy Texas Ethics Commission www.ethic	s.state.tx.us	Version V4.1.0.48da51f7	

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 14/22 Rpt: 17/46		
2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
Hightower, Richard F. (The Honorable)		00036281		
4 Date 5 Full name of contributor out-of-state PAC (ID	#:)	7 Amount of Contribution (\$)		
		\$250.00		
6 Contributor address; City; State; Zip Code				
Waco, TX 76710				
8 Contributor's Principal Occupation	9 Contributor's Job Title	1		
Executive Director	Director			
10 Contributor's employer/law firm	11 Law firm of contributor's sp	bouse (if any)		
McLennan Co. Dispute Resolution Center				
12 If contributor is a child, law firm of parent(s) (if any)				
Date Full name of contributor out-of-state PAC (ID	#:)	Amount of Contribution (\$)		
08/31/2024 Markowitz, Eliz		\$150.00		
Contributor address; City; State; Zip Code				
Katy, TX 77494				
Contributor's Principal Occupation	Contributor's Job Title			
Educator	Teacher			
Contributor's employer/law firm	Law firm of contributor's sp	bouse (if any)		
University of Houston				
If contributor is a child, law firm of parent(s) (if any)				
Date Full name of contributor out-of-state PAC (ID 09/26/2024 Marrow, James	#:)	Amount of Contribution (\$) \$100.00		
		\$100.00		
Contributor address; City; State; Zip Code				
Houston, TX 77079				
Contributor's Principal Occupation	Contributor's Job Title			
Attorney Partner				
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)		
Wright Close & Barger LLP				
If contributor is a child, law firm of parent(s) (if any)				
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The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 15/22 Rpt: 18/46
2 FILER NAME	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Hightower, F	Hightower, Richard F. (The Honorable)		00036281
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/17/2024	McClain, Ann		\$25.00
	6 Contributor address; City; State; Zip Code		
	Austin, TX 78741		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
High School	Counselor	Counselor	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	bouse (if any)
Austin ISD			
12 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 (\$)
07/25/2024	McSherry, Diana		\$5,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77025		
	Principal Occupation	Contributor's Job Title	
CEO		CEO	
	employer/law firm	Law firm of contributor's sp	bouse (if any)
Digisonics, I			
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 (\$)
09/14/2024	Nath, Audrey Contributor address; City; State; Zip Code		\$100.00
	Contributor address, City, State, Zip Code		
	Houston, TX 77019		
Contributor's F	I Principal Occupation	Contributor's Job Title	1
Physician			
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
UTMB			
If contributor is a child, law firm of parent(s) (if any)			
Forme provided	hy Texas Ethics Commission	es state ty us	Version V4.1.0.48da51f7

The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 16/22 Rpt: 19/46
2 FILER NAME Hightower, R	2 FILER NAME Hightower, Richard F. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036281
4 Date 09/09/2024	5 Full name of contributor out-of-state PAC (ID#: Nobles, Jeffery		7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code		
	Georgetown, TX 78628		
8 Contributor's F Attorney	Principal Occupation	9 Contributor's Job Title Senior Counsel	
10 Contributor's e Husch Black		11 Law firm of contributor's sp	pouse (if any)
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/26/2024	Nobles, Jeffery		\$50.00
	Contributor address; City; State; Zip Code		
	Georgetown, TX 78628		
	Principal Occupation	Contributor's Job Title	
Attorney		Senior Counsel	
Husch Black	employer/law firm well	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)	<u> </u>	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
07/22/2024	Paiement, Guy		\$5,000.00
	Contributor address; City; State; Zip Code		
	Los Angeles, CA 90048		
Contributor's F	Principal Occupation	Contributor's Job Title	
Physician Surgeon			
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)	
Cedars Sinai Medical Center			
If contributor is a child, law firm of parent(s) (if any)			
Forms provided	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V4.1.0.48da51f7

The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 17/22 Rpt: 20/46
2 FILER NAME Hightower, F	2 FILER NAME Hightower, Richard F. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036281
4 Date 09/12/2024	5 Full name of contributor out-of-state PAC (ID#: Perdue, Jim		7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77056		
	Principal Occupation	9 Contributor's Job Title	
Attorney		Partner	
10 Contributor's e Perdue & Kie		11 Law firm of contributor's sp Perdue & Kidd	oouse (if any)
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/21/2024	Political Action Committee of Winstead PC		\$1,000.00
	Contributor address; City; State; Zip Code		
Contributor's	Dallas, TX 75201 Principal Occupation	Contributor's Job Title	
Contributor 3 P			
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)
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 (\$)
09/13/2024	Porter & Hedges, LLP		\$1,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77002		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is a child, law firm of parent(s) (if any)			
Forme provided	hy Texas Ethics Commission www.ethic	s state ty us	Version V/4 1 0 //8da51f7

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 18/22 Rpt: 21/46	
2 FILER NAME	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Hightower, R	ichard F. (The Honorable)		00036281
4 Date	5 Full name of contributor out-of-state F	PAC (ID#:)	7 Amount of Contribution (\$)
09/13/2024	Rogers, Morris & Grover LLP		\$500.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77057		
8 Contributor's P	rincipal Occupation	9 Contributor's Job Title	
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	pouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)		
Date		PAC (ID#:)	Amount of Contribution (\$)
09/01/2024	Rosenberg, Marci		\$1,000.00
	Contributor address; City; State; Zip Code		
	Bellaire, TX 77401		
	rincipal Occupation	Contributor's Job Title	
Owner		Owner	
	mployer/law firm	Law firm of contributor's s	pouse (if any)
MRS Couture			
If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of Contribution (\$)
09/06/2024			\$250.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77005		
Contributorio		Contributorio Job Title	
Attorney	Contributor's Principal Occupation Contributor's Job Title Attorney Partner		
Contributor's employer/law firm Law firm of contributor's sp			
Thompson & Horton LLP			
If contributor is a child, law firm of parent(s) (if any)			
L Forms provided I	ov Texas Ethics Commission ww	ww.ethics.state.tx.us	Version V4.1.0.48da51f7

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 19/22 Rpt: 22/46
2 FILER NAME	2 FILER NAME Hightower, Richard F. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036281
4 Date 09/17/2024	5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribution (\$) \$100.00
	Houston, TX 77098		
8 Contributor's P	rincipal Occupation	9 Contributor's Job Title	
Attorney		Trial Attorney	
10 Contributor's er		11 Law firm of contributor's sp	oouse (if any)
Brent Coon &			
12 If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/13/2024	Shipley, George		\$500.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77056		
Contributor's P Attorney	rincipal Occupation	Contributor's Job Title Principal	
	nployer/law firm Montgomery LLP	Law firm of contributor's sp	oouse (if any)
If contributor is	a child, law firm of parent(s) (if any)	•	
Date 09/12/2024	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77008		
Contributor's P	rincipal Occupation	Contributor's Job Title	
Business Dev	Business Development Director		
Contributor's employer/law firm Law firm of contributor's s		oouse (if any)	
North American Oxford Flow			
If contributor is a child, law firm of parent(s) (if any)			
	www.ethic	s state tx us	Version V4 1 0 48da51f7

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 20/22 Rpt: 23/46		
2 FILER NAME Hightower, R	2 FILER NAME Hightower, Richard F. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036281	
4 Date 09/17/2024	 5 Full name of contributor out-of-state PAC (ID#:) Smith, Pate 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$500.00	
	Montgomery, TX 77316			
	rincipal Occupation	9 Contributor's Job Title		
Attorney	mplov <i>orllow firm</i>	Principal		
10 Contributor's e Pate Smith L		11 Law firm of contributor's sp	Jouse (ii any)	
	a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/31/2024	Spencer, Judith		\$5.00	
	Contributor address; City; State; Zip Code			
	Houston, TX 77063			
	rincipal Occupation	Contributor's Job Title		
Not Employe		Not Employed		
	mployer/law firm	Law firm of contributor's sp	bouse (if any)	
Not Employe				
If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/17/2024	Thomas, Seve		\$250.00	
	Contributor address; City; State; Zip Code			
	Houston, TX 77057	T		
	rincipal Occupation	Contributor's Job Title		
Attorney Associate				
Contributor's employer/law firm Law firm of contributor's sy The Hadi Law Firm		bouse (if any)		
If contributor is a child, law firm of parent(s) (if any)				
in contributor is				
Forms provided I	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V4.1.0.48da51f7	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 21/22 Rpt: 24/46
2 FILER NAME Hightower, R	2 FILER NAME Hightower, Richard F. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00036281
	5 Full name of contributor out-of-state PAC (ID#:)		7 Amount of Contribution (\$) \$1,500.00
9 Contributor's F	Dallas, TX 75201 Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)		
Date 08/31/2024	L/2024 Full name of contributor out-of-state PAC (ID#:) Tran, Lieu Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$24.00
	Pearland, TX 77584 Principal Occupation	Contributor's Job Title	
IT Auditor	mployer/law firm	IT Auditor Law firm of contributor's sp	ouse (if any)
The Universit	ty of Texas Health Science Center at Houston		
Date 09/19/2024	Full name of contributor out-of-state PAC (ID#:_ Vinson & Elkins Texas PAC Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$5,000.00
	Houston, TX 77002		
Contributor's P	Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contributor's s		oouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

The Instruc	tion Guide explains how to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 22/22 Rpt: 25/46
2 FILER NAME Hightower, R	ichard F. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00036281	
4 Date 08/20/2024	 5 Full name of contributor out-of-state PAC (ID#: Whitaker, Nancy 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$)\$25.00
	Katy, TX 77449		
8 Contributor's P	rincipal Occupation	9 Contributor's Job Title	
Not Employe	d	Not Employed	
10 Contributor's e		11 Law firm of contributor's sp	oouse (if any)
Not Employe	d		
12 If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/16/2024	Williams, Jerry		\$100.00
	Contributor address; City; State; Zip Code Houston, TX 77027		
Contributor's P	rincipal Occupation	Contributor's Job Title	
Retired		Retired	
Contributor's e Retired	mployer/law firm	Law firm of contributor's sp	bouse (if any)
If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/14/2024	Winston, Karen		\$1,000.00
Ì	Contributor address; City; State; Zip Code		1
	Houston, TX 77027		
Social Worke	rincipal Occupation	Contributor's Job Title Social Worker	
		acusa (if any)	
Self Employe	mployer/law firm rd	bouse (if any)	
	a child, law firm of parent(s) (if any)		
	ov Texas Ethics Commission www.ethic	s state tx us	Version V4 1 0 48da51f7

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense				
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)	
	Sch: 1/21 Rpt: 26/46		Hightower, Richard F. (The Honorable)				00036281	
4	Date 08/06/2024	5	Payee name ActBlue					
6	6 Amount (\$) \$56.81 7 Payee address; City; State; Zip Code P.O. Box 441146 Somerville, ME 02144							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Image: OF EXPENDITURE Check if Austin, TX, officeholder living expense Image: OF Description Online donation fees							officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Of	ffice souç	ht		Office held	
	Date		Payee name					
	09/01/2024		ActBlue					
	Amount (\$) \$214.46		Payee address; City; State; P.O. Box 441146	Zip Coo	le			
	DUDDOGE	(-)	Somerville, ME 02144					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schere Fees	dule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense fees	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Of	ffice sou	ht		Office held	
	Date		Payee name					
	08/07/2024		Area 5 Democrats					
	Amount (\$) \$500.00		Payee address; City; State; 3800 Spencer Hwy., Suite L	Zip Coo	le			
			Pasadena, TX 77504	i				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schere Contributions/Donations Made By Candidate/Officeholder/Political Commit	,	Check if Austir	ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense event sponsorship	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name Of	ffice souç	ht		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	· · · ·	Filer ID (Ethics Commission Filers)						
1	Sch: 2/21 Rpt: 27/46	Hightower, Richard F. (The Honorable)	00036281						
4	Date 07/01/2024	5 Payee name Ashade Technology Inc.							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$3,600.00	7711 Cicada Dr.							
		Missouri City, TX 77459							
8	8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Voter contact system								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	07/27/2024	Ashade Technology Inc.							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$3,600.00	7711 Cicada Dr.							
		Missouri City, TX 77459							
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense SyStem						
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	08/28/2024	Ashade Technology Inc.							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$3,600.00	7711 Cicada Dr.							
		Missouri City, TX 77459							
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense System						
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)			
-	Sch: 3/21 Rpt: 28/46	Hightower, Richard F. (The Honorable)	00036281			
4	Date	5 Payee name				
	09/24/2024	Ashade Technology Inc.				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$3,600.00	7711 Cicada Dr.				
		Missouri City, TX 77459				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense			
		Voter contact				
			,			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	07/15/2024	Bay Area Democratic Movement				
Amount (\$) Payee address; City; State; Zip Code						
	\$150.00 P.O. Box 590383					
		Houston, TX 77259				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense			
		Contribution				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	07/15/2024	Bay Area Democratic Movement				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$40.00	P.O. Box 590383				
		Houston, TX 77259				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense			
			or bowling tournament			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
⊢						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 4/21 Rpt: 29/46	Hightower, Richard F. (The Honorable)	00036281						
4	Date 07/06/2024	5 Payee name Bluehost							
6	6 Amount (\$) 7 Payee address; City; State; Zip Code \$95.88 10 Corporate Drive Suite 300 Burlington, MA 01803								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense Campaign website retention Campaign website retention									
9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH									
	Date	Payee name							
	07/06/2024	Bluehost							
	Amount (\$) Payee address; City; State; Zip Code \$38.17 10 Corporate Drive Suite 300 Burlington, MA 01803								
	PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	utside of Texas. Complete Schedule T. TX, officeholder living expense bsite retention						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	07/06/2024	Bluehost							
	Amount (\$) \$73.34	Payee address; City; State; Zip Code 10 Corporate Drive Suite 300 Burlington, MA 01803							
	PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	utside of Texas. Complete Schedule T. TX, officeholder living expense bsite retention						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Over Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	· · · ·			3	Filer ID (Ethics Commission Filers)
-	Sch: 5/21 Rpt: 30/46		Hightower, Richard F. (The Honorable)				00036281
4	Date 09/02/2024		Payee name Bluehost				
6	Amount (\$) 7 Payee address; City; State; Zip Code 10 Corporate Drive Suite 300 Burlington, MA 01803						
8	8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign website retention						officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office soug	lht		Office held
	Date		Payee name				
	07/13/2024	1	Brazoria County Democratic Party				
	Amount (\$) Payee address; City; State; Zip Code \$500.00 11800 Magnolia Parkway Manvel, TX 77578						
	PURPOSE OF EXPENDITURE	(a) (Category (See Categories listed at the top of this sche Contributions/Donations Made By Candidate/Officeholder/Political Commi				de of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office soug	lht		Office held
	Date		Payee name				
	07/03/2024	1	DonorBox				
	Amount (\$) \$256.35		Payee address; City; State; 1520 Belle View Blvd. Suite 4106 Alexandria, VA 22307	Zip Coo	le		
	PURPOSE OF EXPENDITURE	I	Category (See Categories listed at the top of this sche Fees	∋dule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense ion fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office soug	ıht		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 6/21 Rpt: 31/46	Hightower, Richard F. (The Honorable)	00036281							
4	Date 09/18/2024	5 Payee name DonorBox								
6	6 Amount (\$) \$11.93 \$11.93 7 Payee address; City; State; Zip Code 1520 Belle View Blvd. Suite 4106 Alexandria, VA 22307									
8	 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online contribution fees 									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
08/01/2024 Fort Bend County Democratic Party										
	Amount (\$)	Payee address; City; State; Zip Code								
	\$2,500.00	13515 SW Freeway								
		#204 Sugar Land, TX 77478								
	PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	utside of Texas. Complete Schedule T. TX, officeholder living expense or Gala sponsorship							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	08/06/2024	Fort Bend Pride								
	Amount (\$) \$579.55	Payee address; City; State; Zip Code 3027 Crestone Dr.								
		Rosenberg, TX 77471								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 7/21 Rpt: 32/46	Hightower, Richard F. (The Honorable) 00036281						
4	Date	Payee name						
	08/11/2024	Galveston County Democratic Party						
6	Amount (\$)	Payee address; City; State; Zip Code						
	\$550.00	P.O. Box 1071						
		LaMarque, TX 77586						
8	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Contributions/Donations Made By	utside of Texas. Complete Schedule T.					
	EXPENDITORE		TX, officeholder living expense					
		Contribution						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date							
	08/22/2024	Payee name Harris County Democratic Lawyers Association						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$35.00	3401 Allen Parkway						
		Suite 100						
		Houston, TX 77019						
	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Contributions/Donations Made By	utside of Texas. Complete Schedule T.					
			TX, officeholder living expense					
			or monthly luncheon ticket					
	Complete ONIL V if direct	Candidate/Officeholder name Office sought	Office held					
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Onice held					
⊨	Date	Payee name						
	08/29/2024	Harris County Democratic Party						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$120.00	4619 Lyons Ave.						
		Houston, TX 77020						
	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Contributions/Donations Made By	utside of Texas. Complete Schedule T.					
	EXPENDITORE		TX, officeholder living expense					
		Contribution for	or sustaining membership dues					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Overhead/Rental Expense Trai Food/Beverage Expense Polling Expense Trai Gift/Awards/Memorials Expense Printing Expense Trai				Travel in District Travel Out of Dist	uipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 8/21 Rpt: 33/46		Hightower, Richard F. (The Honorable) 00036281						
4	Date	5	Payee name						
	07/01/2024		Harris County Democratic Party						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le				
	\$12,675.00		4619 Lyons Ave.						
			Houston, TX 77020						
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) De	scription			
	EXPENDITURE		Contributions/Donations Made By		님			de of Texas. Comp	
			Candidate/Officeholder/Political Comm	ittee		ontribution	17,	officeholder living	expense
	Operation ONITY if all an at				.1.4			0#***	1-1
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	Int			Office he	la
	Date		Payee name						
	08/21/2024		Harris County Democratic Party						
-		-		Zip Co	10				
	Amount (\$)			Zip Co	le				
	\$2,250.00		4619 Lyons Ave.						
			Houston, TX 77020						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) De	scription			
	OF EXPENDITURE		Contributions/Donations Made By					de of Texas. Comp	
			Candidate/Officeholder/Political Comm	ittee				officeholder living	•
							01	JJR event sp	Julisuisilip
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Office sou	jht			Office he	ld
⊨	Date	Γ	Payee name						
	09/17/2024		Harris County Tejano Democrats						
⊢	Amount (\$)	\vdash	Payee address; City; State;	Zip Co	le				
	\$150.00		3213 Houston Ave.	p 00.					
	\$100.00								
			Houston, TX 77009						
⊢	PURPOSE	(a)	Category (See Categories listed at the top of this scho	odulo)	(b) Do	scription			
	OF	(``'	Contributions/Donations Made By	euule)	, ре П		outsi	de of Texas. Comp	lete Schedule T.
	EXPENDITURE		Candidate/Officeholder/Political Comm	ittee	H	Check if Austin,	TX,	officeholder living	expense
								Roast & Toa	st event and
					me	embership o	due	es	
-	Complete ONLY if direct	L(Candidate/Officeholder name C	Office sou	iht			Office he	ld
	expenditure to benefit C/Oł							2	
-									

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 9/21 Rpt: 34/46								
4	Date	5	Payee name						
	08/11/2024		Houston Black American Democrats						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le				
	\$250.00		5300 Griggs Road						
			Houston, TX 77021						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Contributions/Donations Made By	eduic)		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITORE		Candidate/Officeholder/Political Comm	ittee			, officeholder living expense		
					Contribution	for	event sponsorship		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name C	Office sou	ht		Office held		
	Date		Payee name						
08/07/2024 Houston Lawyers Association									
Amount (\$) Payee address; City; State; Zip Code									
	\$83.00		P.O. Box 300009						
			Houston, TX 77230						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	EXPENDITURE		Fees				ide of Texas. Complete Schedule T. , officeholder living expense		
					Membership				
					menneerenip		-		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Office sou	ht		Office held		
	- p								
	Date		Payee name						
	07/15/2024		Humble Area Democrats						
	Amount (\$)		Payee address; City; State;	Zip Co	le				
	\$60.00		P.O. Box 3863						
			Humble, TX 77347						
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	(b) Description		ide of Touron Complete Celerchile T		
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Comm	ittee			ide of Texas. Complete Schedule T. , officeholder living expense		
				mee			bowling tournament		
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name C)ffice sou	ht		Office held		
1									

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-					n/Fundraising Expense ation Equipment & Related Expense District t of District enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3 Filer ID	(Ethics Commission Filers)
-	Sch: 10/21 Rpt: 35/46		Hightower, Richard F. (The Honorable) 00036281					
4	Date 09/23/2024		Payee name Innovative Solutions IT					
6	6 Amount (\$) \$175.00 7 Payee address; City; State; Zip Code 10862 Redstone Court Missouri City, TX 77459							
 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense GOTV slate card for Fort Bend County 							er living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office	e sought		Offic	ce held
	Date		Payee name					
	07/05/2024		Katy Area Democrats					
	Amount (\$)		Payee address; City; S	State; Zij	code			
	\$150.00		P.O. Box 6952 Katy, TX 77491					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of t Contributions/Donations Made By Candidate/Officeholder/Political Co				outside of Texas. , TX, officeholder	s. Complete Schedule T. rr living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office	e sought		Offic	ce held
	Date		Payee name					
	07/30/2024		Katy Pride					
	Amount (\$) \$250.00		Payee address; City; S 2201 Morton Rd.	State; Zij	Code			
			Katy, TX 77449					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of t Contributions/Donations Made By Candidate/Officeholder/Political C				, TX, officeholder	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office	e sought		Offic	ice held

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Gift/Awards/Memor nmittee Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense				Travel in District Travel Out of Distri	uipment & Related Expense
1	Total pages Schedule F1:	2		<u> </u>		F -	3	Filer ID	(Ethics Commission Filers)
-	Sch: 11/21 Rpt: 36/46	1 I	Hightower, Richard F. (TI	he Honorable))			00036281	
4	Date 07/10/2024		Payee name LinkedIn						
6	6 Amount (\$) 7 Payee address; City; State; Zip Code \$64.94 605 W. Maude Ave. Sunnyvale, CA 94085								
8 PURPOSE OF EXPENDITURE (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. Check if Austin, TX, officeholder living expense Online professional networking tool							expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held	d
	Date	Γ	Payee name						
	08/11/2024		LinkedIn						
	Amount (\$) \$64.94		Payee address; City; 605 W. Maude Ave.	State;	; Zip Coc	e			
	PURPOSE OF EXPENDITURE	(a)	Sunnyvale, CA 94085 Category _{(See Categories listed} Office Overhead/Rental E		iedule)	Check if Austir	n, TX,	ide of Texas. Comple , officeholder living e Dnal networkin	expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held					d		
	Date	Π	Payee name						
	09/12/2024		LinkedIn						
	Amount (\$) \$64.94	1	Payee address; City; 605 W. Maude Ave.	State;	; Zip Coc	e			
			Sunnyvale, CA 94085						
	PURPOSE OF EXPENDITURE		Category (See Categories listed Office Overhead/Rental E		iedule)	Check if Austir	n, TX,	ide of Texas. Comple , officeholder living e onal networkin	expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held	d

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 12/21 Rpt: 37/46		Hightower, Richard F. (The Honorable)				00036281		
4	Date	5	Payee name						
	08/28/2024		M-3 Graphics						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le				
	\$1,221.06		11780 S. Wilcrest Drive						
			Houston, TX 77099						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Printing Expense				ide of Texas. Complete Schedule T.		
					Campaign sig		, officeholder living expense		
					Campaign of	gne			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C)ffice sou	ıht		Office held		
╞	Date	<u> </u>	Davaa nama						
	08/29/2024		Payee name Mexican American Bar Assoc. Houston	'n					
_		<u> </u>			10				
	Amount (\$) \$75.00		Payee address; City; State; P.O. Box 303	Zip Co	je				
	\$75.00		P.O. B0X 303						
			Houston, TX 77001						
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	(b) Description				
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Comm	ittoo			ide of Texas. Complete Schedule T. , officeholder living expense		
			Candidate/Onicenoiden/Folitical Comm	illee	Contribution for Membership dues				
							·		
	Complete ONLY if direct	<u>с</u>	andidate/Officeholder name C)ffice sou	Jht		Office held		
	expenditure to benefit C/OI	Н							
	Date		Payee name						
	09/24/2024		Mexican American Bar Assoc. Houston	ı					
	Amount (\$)		Payee address; City; State;	Zip Co	le				
	\$300.00		P.O. Box 303						
			Houston, TX 77001						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Contributions/Donations Made By				ide of Texas. Complete Schedule T.		
			Candidate/Officeholder/Political Comm	ittee			, officeholder living expense Fall gala ticket		
					Contribution	101			
-	Complete ONLY if direct		Candidate/Officeholder name	Office sou	iht		Office held		
	expenditure to benefit C/Oł				,				
⊢									

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Office Streamse Git/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:		Filer ID (Ethics Commission Filers)							
<u> </u>	Sch: 13/21 Rpt: 38/46	Hightower, Richard F. (The Honorable)	00036281							
4	Date	Payee name								
	08/29/2024	Meyerland Area Democrats Club								
6	Amount (\$) \$250.00	Payee address; City; State; Zip Code 9603 Chatfield St. Houston, TX 77025								
8	PURPOSE	i								
U	OF	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution 								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	08/30/2024	Monarch Printing								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$1,169.10	6605 McGrew Houston, TX 77087								
	PURPOSE OF EXPENDITURE	de of Texas. Complete Schedule T. officeholder living expense eral								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	09/23/2024	Monarch Printing								
	Amount (\$) \$2,371.93	Payee address; City; State; Zip Code 6605 McGrew								
		Houston, TX 77087								
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense ateral							
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2 FILER NAME	Filer ID (Ethics Commission Filers)							
	Sch: 14/21 Rpt: 39/46	Hightower, Richard F. (The Honorable)	00036281							
4	Date 09/23/2024	 Payee name Nasrullah, Mohammed 								
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 13515 Robin Hill Ct. Houston, TX 77059								
8	PURPOSE OF EXPENDITURE	OF Salaries/Wages/Contract Labor								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	08/01/2024	Oak Forest Area Democrats								
	Amount (\$) \$200.00	Payee address;City;State;Zip Code1046 Stonecrest Dr.								
		Houston, TX 77018								
	PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	side of Texas. Complete Schedule T. K, officeholder living expense • event sponsorship							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	07/04/2024	Olive, Ken								
	Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 5447 Imogene								
		Houston, TX 77096								
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. ^T X, officeholder living expense I lting Services							
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME	-			-		3	Filer ID	(Ethics Co	mmission Filers)
-	Sch: 15/21 Rpt: 40/46	1			(The Honorable	e)			Ĭ	00036281		
4	Date 07/27/2024	5	Payee name Olive, Ken									
6		-			State	o: Zin Co	do					
0	Amount (\$) \$2,000.00	\$2,000.00 5447 Imogene										
_		<u> </u>	Houston, T									
8	PURPOSE OF EXPENDITURE	OF Consulting Expense							э Т.			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder na	me	Office sou	ght			Office he	eld	
	Date		Payee name									
	08/28/2024		Olive, Ken									
	Amount (\$)		Payee addres	ss; City;	State	e; Zip Co	de					
	\$2,000.00		5447 Imoge			-, <u>-</u> p						
			Houston, TX	X 77096								
PURPOSE (OF EXPENDITURE			Consulting Expense				b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense General consulting services					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder nai	me	Office sou	ght			Office he	eld	
	Date		Payee name									
	09/26/2024		Olive, Ken									
	Amount (\$) \$3,500.00		Payee addres 5447 Imoge		State	e; Zip Co	de					
			Houston, TX	× 77096								
	PURPOSE OF EXPENDITURE		Category (Se Consulting		ted at the top of this sc	chedule)			, тх,	de of Texas. Com officeholder living ng services		э Т.
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offi	ceholder na	me	Office sou	ght			Office he	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	-	Filer ID (Ethics Commission Filers)						
	Sch: 16/21 Rpt: 41/46	Hightower, Richard F. (The Honorable)	00036281						
4	Date 07/13/2024	5 Payee name Run Sister Run							
6	Amount (\$) \$100.00	7 Payee address; City; State; Zip Code P.O. Box 66470 Houston, TX 77266							
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution 							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date 09/02/2024	Payee name 2024 Sharpstown Civic Association							
	Amount (\$) \$500.00	Payee address; City; State; Zip Code P.O. Box 36559 Houston, TX 77365							
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Contribution for Voters' Guide 							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	08/06/2024	Southwest Democrats							
	Amount (\$) \$200.00	Payee address; City; State; Zip Code P.O. Box 2053							
		Bellaire, TX 77401							
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Gift/Awards/ mittee Legal Servic	age Expense Memorials Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	12			1000 10 00.1		3	Filer ID (Ethics Commission Filers)			
T	Sch: 17/21 Rpt: 42/46		Hightower, Richard	F. (The Honorable)	1		3	Filer ID (Ethics Commission Filers) 00036281			
4	Date	5	Payee name								
	08/08/2024		Stripe								
6	Amount (\$) \$59.22	 Payee address; City; State; Zip Code 354 Oyster Point Blvd. South San Francisco, CA 94080 									
8	PURPOSE	(a)	Category (See Categories	s listed at the top of this sche	edule)	b) Description					
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online donation fees									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder	name C	Office soug	ht		Office held			
	Date		Payee name								
	09/03/2024		Stripe								
	Amount (\$)		Payee address; Ci	ty; State;	Zip Cod	e					
	\$316.13		354 Oyster Point Blv South San Francisco								
PURPOSE OF EXPENDITURE							n, TX,	itside of Texas. Complete Schedule T. 'X, officeholder living expense n fees			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held					Office held				
	Date		Payee name								
	07/04/2024		Strong Strategies, L	LC							
	Amount (\$) \$1,732.96		Payee address; Ci 325 W. 18th St.	ty; State;	Zip Cod	е					
			Houston, TX 77008								
	PURPOSE OF EXPENDITURE		Category (See Categorie: Consulting Expense	s listed at the top of this sche	edule)	Check if Austir	ı, TX,	de of Texas. Complete Schedule T. . officeholder living expense DMpliance services and expenses			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder	name C	Office soug	ht		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking 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: 18/21 Rpt: 43/46	Hightower, Richard F. (The Honorable) 00036281							
4	Date 08/11/2024	5 Payee name Strong Strategies, LLC							
6	Amount (\$) \$1,513.14	7 Payee address; City; State; Zip Code 325 W. 18th St. Houston, TX 77008							
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraising & compliance services and expenses 							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
	Date	Payee name							
	09/03/2024	Strong Strategies, LLC							
	Amount (\$) \$1,540.17	Payee address; City; State; Zip Code 325 W. 18th St. Houston, TX 77008							
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraising & compliance services and expenses 							
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
	Date	Payee name							
	09/24/2024	Suhas for Virginia							
	Amount (\$) \$250.00	Payee address; City; State; Zip Code P.O. Box 302							
		Asburn, VA 20146							
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution for Fort Bend event ticket 							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Ũ	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 19/21 Rpt: 44/46		Hightower, Richard F. (The Honorable))			00036281		
4	Date	5	Payee name						
	07/24/2024		Texas Coalition of Black Democrats-Fo	ort Bend					
6	Amount (\$)	7	Payee address; City; State;	Zip Coo	le				
	\$250.00		P.O. Box 1394						
			Missouri City, TX 77459						
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	b) Description				
	EXPENDITURE		Contributions/Donations Made By				side of Texas. Complete Schedule T.		
			Candidate/Officeholder/Political Comm	littee	Contribution	I, I A	, onceroider living expense		
					Contribution				
9	Complete ONLY if direct		Candidate/Officeholder name C	Office soug	ht		Office held		
	expenditure to benefit C/OI								
	Date		Payee name						
	08/09/2024		Texas Democratic Women of Galvesto	n County					
_	Amount (\$) Payee address; City; State; Zip Code								
	\$250.00		1201 Newport Blvd.						
	+_00.00								
			League City, TX 77573						
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	b) Description				
	OF EXPENDITURE		Contributions/Donations Made By				side of Texas. Complete Schedule T.		
			Candidate/Officeholder/Political Comm	littee			a, officeholder living expense event sponsorship		
					Contribution	101	event sponsorsnip		
	Complete ONLY if direct		Candidate/Officeholder name C	Office soug	ht		Office held		
	expenditure to benefit C/OI	Н							
	Date		Payee name						
	08/23/2024		Texas Democratic Women						
	Amount (\$)		Payee address; City; State;	Zip Coo	le				
	\$100.00		P.O. Box 301411						
			Austin, TX 78703						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	b) Description				
	EXPENDITURE		Contributions/Donations Made By				side of Texas. Complete Schedule T.		
			Candidate/Officeholder/Political Comm	littee			x, officeholder living expense		
					Contribution	101			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name C	Office soug	ht		Office held		
⊢									

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						raising Expense quipment & Related Expense trict category not listed above)			
1	Total pages Schedule F1:					3 Filer ID	(Ethics Commission Filers)			
	Sch: 20/21 Rpt: 45/46	lightower, Richard F	. (The Honorable)			00036281	· · ·			
4	Date 09/17/2024	ayee name ony's Restaurant								
6	Amount (\$) \$2,107.15	 Payee address; City; State; Zip Code 3755 Richmond Ave. Houston, TX 77046 								
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraising event 								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder n	ame Of	fice sought		Office he	ld			
	Date	ayee name								
	09/16/2024	Vest Houston Demo	crats							
	Amount (\$) \$250.00	ayee address; Cit 3114 Waldemere D Iouston, TX 77077		Zip Code						
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Completing the Contribution of the Contribution of the Contribution of the Contribution 								
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held					ld			
	Date	ayee name								
	09/19/2024	Vomen in Novembe	PAC							
	Amount (\$) \$500.00	ayee address; Cit 5918 Cavendish Dr		Zip Code						
		louston, TX 77059								
	PURPOSE OF EXPENDITURE	Category (See Categories Contributions/Donational Contributions/Donational Conditional Conditiona	ons Made By			outside of Texas. Com I, TX, officeholder living				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder n	ame Of	fice sought		Office he	eld			

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			EXPENDITURE CATEGO Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Loan Repayme Office Overhea Polling Expens Printing Expens Salaries/Wage	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
	Total pages Schedule F1:		=			3	Filer ID	(Ethics Commission Filers)
Ľ	Sch: 21/21 Rpt: 46/46		- Richard F. (The Honorabl	۵)			00036281	
	-	-	-	c)			00030201	
4	Date 09/17/2024	5 Payee name iAspire						
6	Amount (\$) \$450.00	 Payee addre 4305 Engle Houston, T 	ford St.	e; Zip Code				
8	PURPOSE OF EXPENDITURE	Houston, TX 77026 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution for Senior's luncheon sponse						expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		iceholder name	Office sought			Office hel	d