#### FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00082005 13 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mrs. Maritza M. NAME Date Received **ELECTRONICALLY FILED** 10/07/2024 NICKNAME LAST **SUFFIX** Antu CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Tammy J. NAME NICKNAME LAST **SUFFIX Thomas CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (281) 541-7024 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff X appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 07/01/2024 09/26/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/05/2024 χ General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE Court Of Appeals, Justice Place 5 District 14

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM JC/OH COVER SHEET PG 2

2 of 13

13 C / OH NAME	<b>14</b> Filer ID 00082005	(Ethics Com	mission Filers)					
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures	accepted or political expenditu may have been made without to equired to report this information	the candidate's or office	eholder's kno	owledge or		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM	E					
_	GENERAL							
	CDECIFIC	COMMITTEE ADD	KESS					
	SPECIFIC							
		COMMITTEE CAM	PAIGN TREASURER NAME					
		COMMITTEE CAM	PAIGN TREASURER ADDRES	SS				
16 CONTRIBUTION TOTALS			DNTRIBUTIONS(OTHER THAN CONTRIBUTIONS MADE ELEC		\$	0.00		
		ICAL CONTRIBU	TIONS OR GUARANTEES OF LOANS	o)	\$	9,925.00		
EXPENDITURE	S)	\$	0.00					
TOTALS	4 TOTAL BOLLT		<b>-</b>	0.00				
	4. TOTAL POLIT	ICAL EXPENDITU	JKES		\$	12,046.44		
CONTRIBUTION BALANCE	REPORTING PE	RIOD	IS MAINTAINED AS OF THE L		\$	17,174.00		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP		L OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00		
<b>17</b> AFFIDAVIT			I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.					
			Mrs	Maritza M. Antu				
		Signature of Candidate or Officeholder						
AFFIX NO	TARY STAMP / SEAL AB	OVE						
Sworn to and subs	cribed before me, by the s	aid		, this the		day		
of	, 20, to co	ertify which, witness	my hand and seal of office.					
Signature of offi	cer administering oath	Printed name	of officer administering oath	Title of office	r administeri	ng oath		

### SUBTOTALS - JC/OH

## FORM JC/OH COVER SHEET PG 3

				3 of 13				
	Antu		itza M. (Mrs.)	<b>19</b> Filer ID 00082005	(Ethics C	Commission Filers)		
20			E SUBTOTALS SCHEDULE		SUE	BTOTAL AMOUNT		
	1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	9,925.00			
	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 CONTRIBUTIONS	6	\$	11,666.44		
	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.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	380.00		
	10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$			
	11.		\$					
	12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$			

	MONET	ARY POLITICAL C	SCHEDULE A(J)1		
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 1/5 Rpt: 4/13
2	FILER NAME Antu, Maritza				3 Filer ID (Ethics Commission Filers) 00082005
4	Date 09/17/2024	<ul> <li>5 Full name of contributor</li> <li>Casper, Sara</li> <li>6 Contributor address; City; St</li> <li>Deer Park, TX 77536</li> </ul>	out-of-state PAC (ID#:_		7 Amount of Contribution (\$) \$25.00
8	Contributor's F	I Principal Occupation		9 Contributor's Job Title	
	Retired			Retired	
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	pouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if a	ny)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
09/19/2024 Cowell, Ronnye  Contributor address; City; State; Zip Code  Houston, TX 77024					\$250.00
	Contributor's I	Principal Occupation		Contributor's Job Title	
	Retired	incipal occupation		Retired	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	Retired  If contributor is	s a child, law firm of parent(s) (if a	ny)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	07/20/2024 Elizabeth, Behncke  Contributor address; City; State; Zip Code  Houston, TX 77019				\$750.00
	Contributor's I	Principal Occupation		Contributor's Job Title	•
	Attorney			Attorney	
		employer/law firm		Law firm of contributor's sp	pouse (if any)
	Shell			Susman Godfrey, LLP	
	if contributor is	s a child, law firm of parent(s) (if a	ny)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 2/5 Rpt: 5/13
2	FILER NAME Antu, Maritza	a M. (Mrs.)			3	Filer ID (Ethics Commission Filers) 00082005
4	Date 09/18/2024	Full name of contributor     Garza, Vilma     Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$50.00
		Cypress, TX 77429				
8		Principal Occupation		9 Contributor's Job Title		
	Retired			Retired		
10	Contributor's e Retired	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)	1		
F	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
09/17/2024 George, Dawson  Contributor address; City; State; Zip Code						\$500.00
		Houston, TX 77057				
		Principal Occupation		Contributor's Job Title		
	Retired			Retired		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)	I .		
-	Date	Full name of contributor	out-of-state PAC (ID#:	)	Т	Amount of Contribution (\$)
	07/01/2024	Gumberger, Kurt				\$500.00
		Contributor address; City;  Houston, TX 77006	State; Zip Code			
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Self-Employ	ed				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 3/5 Rpt: 6/13
2	FILER NAME Antu, Maritza	a M. (Mrs.)			3	Filer ID (Ethics Commission Filers) 00082005
4	Date 09/22/2024	5 Full name of contributor Hoover Slovacek LLP 6 Contributor address; City;	out-of-state PAC (ID#:_		7	Amount of Contribution (\$) \$500.00
		Houston , TX 77210				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Π	Amount of Contribution (\$)
	09/17/2024	Lardas, Peter  Contributor address; City;	State; Zip Code			\$100.00
		Rosharon, TX 77583				
		Principal Occupation		Contributor's Job Title		
	Retired			Retired		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)
	09/25/2024	Martin, Scott				\$1,000.00
Contributor address; City; State; Zip (			State; Zip Code		•	
-	Contributor's I	Houston , TX 77057 Principal Occupation		Contributor's Job Title	<u> </u>	
	Retired	molpai Goddpaion		Retired		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL C		SCHEDULE A(J)1			
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A(J)1: Sch: 4/5 Rpt: 7/13	
2	FILER NAME Antu, Maritza	a M. (Mrs.)			3	Filer ID (Ethics Commission Filers) 00082005	
4	Date 09/14/2024	D9/14/2024 McEvily, Conor  6 Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$100.00	
		Houston, TX 77005					
8		Principal Occupation		9 Contributor's Job Title			
	Attorney			Attorney			
10	Contributor's 6 Gibbs Bruns	employer/law firm , LLP		11 Law firm of contributor's sp	ous	se (if any)	
12	If contributor is	s a child, law firm of parent(s) (if a	ny)	I			
F	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	09/22/2024	Shinn, Shann  Contributor address; City; St	ate; Zip Code		•	\$50.00	
		Cypress, TX 77429					
		Principal Occupation		Contributor's Job Title			
	Manger			Accounting Manager			
		employer/law firm		Law firm of contributor's sp	ous	se (if any)	
	Lanier Law F		m. A				
	II CONTRIBUTOR IS	s a child, law firm of parent(s) (if a	ny)				
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	08/22/2024	Texans for Lawsuit Reform	n PAC			\$5,000.00	
		Contributor address; City; St Austin , TX 78701	ate; Zip Code				
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)	
	If contributor is	s a child, law firm of parent(s) (if a	ny)	<u>L</u>			

MONE	TARY POLITICAL CONTRIBU	SCHEDULE A(J)1			
The Inst	ruction Guide explains how to complete th	his form.	1 Total pages Schedule A(J)1: Sch: 5/5 Rpt: 8/13		
2 FILER NAM	ME itza M. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00082005		
4 Date 09/17/202	5 Full name of contributor  ut-of-state PAC	7 Amount of Contribution (\$) \$100.00			
	Seabrook, TX 77586				
8 Contributor	's Principal Occupation	9 Contributor's Job Title	•		
Manager		General Manager			
10 Contributor MMKK, In	's employer/law firm C.	11 Law firm of contributor's s	pouse (if any)		
	or is a child, law firm of parent(s) (if any)				
Date	Full name of contributor out-of-state PAC	(ID#:	Amount of Contribution (\$)		
09/18/202	_	\$1,000.00			
	Contributor address; City; State; Zip Code				
0	Houston , TX 77227	Occasilla de de Tido			
Principal	's Principal Occupation	Contributor's Job Title  Managing Partner			
	's employer/law firm	Law firm of contributor's s	nouse (if any)		
	national, LLC	Edw IIIII of contributor 3 3	pouse (ii ariy)		
	or is a child, law firm of parent(s) (if any)				

### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 1/3 Rpt: 9/13	Antu, Maritza M. (Mrs.) 00082005
4	Date	5 Payee name
	09/10/2024	Aspen Fiber Networks
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$704.86	P.O. Box 17239
		Sugar Land, TX 77496
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense  Website
		website
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
$\vdash$	Date	Dougo nomo
	07/24/2024	Payee name Bank Of America
	Amount (\$)	Payee address; City; State; Zip Code
	\$41.51	6732 Stella Link Road
		Houston, TX 77005
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Checks
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	08/07/2024	Colon & Company
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.00	1500 S. Dairy Ashford
		351
		Houston , TX 77077
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Push Cards
	0 1. 0	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held

### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee I	Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid			pense ages/	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a		
1	Total pages Schedule F1:							l	Filer ID	(Ethics Commission Filers)	
	Sch: 2/3 Rpt: 10/13	Antu, Maritza	а М. (Mrs.) ————					<u> </u>	00082005		
4	Date	5 Payee name									
L	08/12/2024	Fort Bend Ro	epublican Party								
6	Amount (\$)	7 Payee addres	s; City;	State;	; Zip Cod	de					
	\$5,000.00	5846 New To	erritory Blvd.								
		Sugar Land,	TX 77479								
8	PURPOSE	(a) Category (See	e Categories listed at the t	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE	Advertising E	Expense			}	<b>=</b>		de of Texas. Com officeholder living	plete Schedule T.	
							Advertising Ex			g expense	
							y <b>–</b>	1			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Offic	eholder name	C	Office soug	ght			Office he	eld	
H	Date	Dovos reserve				_		_			
	09/23/2024	Payee name Harris Count	ty Republican Pai	rtv							
					; Zip Cod	40					
	Amount (\$) \$5,000.00	Payee addres 7232 Wynnw	•	ડાલા <del>0</del> ,	, ZIP C0(	ue					
	Ψ5,000.00	1232 VVYIIIV	voou Lane								
		Houston, TX									
	PURPOSE OF		e Categories listed at the t	top of this scho	edule)	(b)	Description	autois	to of Toyon Com	nloto Schodulo T	
	EXPENDITURE	Advertising E	=xpense				<b>=</b>		officeholder living	plete Schedule T. g expense	
							Judges' Ad				
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Offic	eholder name	C	Office soug	ght			Office he	eld	
	Date	Payee name									
	09/05/2024	Kingwood Te	ea Party								
	Amount (\$)	Payee addres	s; City;	State;	; Zip Coo	de					
	\$100.00	2261 Northp	ark Drive								
		109									
		Kingwood, T	X 77339								
	PURPOSE	(a) Category (See	e Categories listed at the t	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE	Contributions	s/Donations Made	е Ву	, l	ļ	Check if travel of			plete Schedule T.	
	LA LABITORE	Candidate/O	officeholder/Politic	cal Comm	ittee		Check if Austin,	, TX,	officeholder living	g expense	
							GUIV				
	Complete ONLY if direct	Candidate/Offic	eholder name		Office soug	thr			Office he	7ld	
	expenditure to benefit C/OF		CHOIGE HAITIE	C	Since soul	grit			Office III	JIU.	

## 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 Con Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (carbon a extension and listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee I	Giff/Awards/Memorials Legal Services <b>The Instruction G</b>			ages	Contract Labor		OTHER (enter	a category not listed	above)
1	Total pages Schedule F1:	12			•		_	İ	3	Filer ID	(Ethics Commis	scion Eilors)
1	Sch: 3/3 Rpt: 11/13	<b> </b>		o M (Mrc)						00082005	•	SSIUIT FIICIS)
	<u> </u>		Antu, Maritza	a IVI. (IVIIS.)						00062005	1	
4	Date	5	Payee name									
	09/23/2024		Olivares, Gil	da								
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Cod	de					
	\$500.00		1324 N. She	phard Drive								
			Suite 120									
			Houston, TX	77008								
8	PURPOSE	(2)					(h)	Description				
١	OF	<sup>(a)</sup>		e Categories listed at	he top of this sched	dule)	(1)		outsio	de of Texas Co	mplete Schedule T.	
	EXPENDITURE		Advertising E	Expense				Check if Austin,				
								Prep for Ad				
								·				
9	Complete ONLY if direct		Candidate/Offic	eholder name	Of	ffice soug	ght			Office I	neld	
	expenditure to benefit C/Ol	7										
	Date		Payee name									
	09/02/2024		Raise the Mo	oney, Inc.								
	Amount (\$)		Payee addres	s; City;	State;	Zip Cod	de					
	\$195.07		P. O. Box 26	6466								
			Little Rock ,	AR 72221								
	PURPOSE	(a)	Category (Se	e Categories listed at	he top of this sched	dule)	(b)	Description				
	OF EXPENDITURE		Accounting/E	Banking				<b>—</b>			mplete Schedule T.	
								Check if Austin, Fees for using			ng expense	
								rees ioi usiii	y Si	ervice		
_	Complete ONLY if direct	<u> </u>	Candidata/Offic	scholder neme	Of	ffine sour	ab+			Office I	aald	
	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Offic	enoluer name	Oi	ffice soug	JIIL			Office	ieiu	
H												

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS

### SCHEDULE G

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Travel in District Travel Out of District OTHER (enter a category not listed above)					
	Credit Card Payment		The Instruction Guide explains	how to co	omplete this form.				
1	Total pages Schedule G: Sch: 1/2 Rpt: 12/13	2 FILER NAMI Antu, Marit	E za M. (Mrs.)			1	Filer ID 00082005	(Ethics Commission	Filers)
4									
4	Date 09/23/2024	5 Payee name Aronson, Jo							
6	Amount (\$)	7 Payee addre	ss; City; State	; Zip Co	ode				
	\$125.00	9643 Page	wood Lane						
	Reimbursement from political contributions intended	Houston , 1	X 77063						
8	PURPOSE	(a) Category (s	ee Categories listed at the top of this sch	nedule)	(b) Description	Che	ck if travel ou	ıtside of Texas. Complete S	Schedule T.
	OF EXPENDITURE	Advertising	Expense			Che	ck if Austin, 1	TX, officeholder living expen	se
	EXPENDITURE		·		Prep for Ad				
9	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought			Office held	
	C/OH								
	Date	Payee name							
	09/22/2024	Aronson, Jo							
	Amount (\$)	· .		· 7in C	odo				
	\$125.00	9043 Page	wood Lane						
	X Reimbursement from political contributions intended	Houston , 1	X 77063						
	PURPOSE	Category (S	ee Categories listed at the top of this sch	nedule)	Description	Che	ck if travel ou	utside of Texas. Complete S	Schedule T.
	OF EXPENDITURE	Advertising	Expense		Check if Austin, TX, officeholder living expense				
	EXI ENDITORE				Prep for Ad				
	Complete ONLY if direct	L Candidate/Office	holder name		Office sought			Office held	
	expenditure to benefit C/OH	candidate/Office	noider name		Office Sought			Office field	
	Date								
	09/22/2024	Payee name Kana, Kelly							
	Amount (\$)	Payee addre		; Zip Co	ode				
	\$65.00	3901 Bellal	re Boulevard						
	Reimbursement from political contributions intended	Houston , 1	X 77025						
	PURPOSE	Category (S	ee Categories listed at the top of this sch	nedule)	Description	Che	ck if travel ou	utside of Texas. Complete S	Schedule T.
	OF EXPENDITURE	Advertising	Expense		[	Che	ck if Austin, 1	TX, officeholder living expen	se
					Prep for Ad				
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought			Office held	

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Total pages Schedule G: Filer ID (Ethics Commission Filers) Sch: 2/2 Rpt: 13/13 Antu, Maritza M. (Mrs.) 00082005 Date Payee name 09/23/2024 Kana, Kelly 6 Amount (\$) Payee address; City; State; Zip Code \$65.00 3901 Bellaire Boulevard Reimbursement from political contributions intended Х Houston, TX 77025 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Prep for Ad Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH