### JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM JC/OH COVER SHEET PG 1

The JC/OH Instructior	n Guide explains how to c	omplete this form.	1 Filer ID (Ethics Commis	sion Filers)	2 Total pages fi	
		FIDOT	00066411	N 41	· · · · · · · · · · · · · · · · · · ·	53
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
NAME	The Honorable	Fredericka M.			Date Received	
					ELECTRONIC	
	NICKNAME	LAST		SUFFIX	10/07/2024	
		Phillips				
					Data Hand daliwana da	n Data Daataa daad
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX;	APT/SUITE#; CIT	Υ;	ZIP CODE	Date Hand-delivered of	r Date Postmarked
MAILING						
ADDRESS	REDACTED PER	254.0313, GOV'T (	CODE		Receipt #	Amount
Change of Address						
Change of Address					Date Processed	
					Date Imaged	
					-	
5 CAMPAIGN	MS/MRS/MR	FIRST			MI	
TREASURER					IVII	
NAME	Mrs.	Alva				
	NICKNAME	LAST			SUFFIX	
		Wesley-Thoma	26			
		westey-mom	45			
6 CAMPAIGN	STREET ADDRESS (NC	PO BOX PLEASE);	AP1	/ SUITE #; CITY;	ST	ATE; ZIP CODE
TREASURER						
ADDRESS		254.0313, GOV'T (				
(Residence or Business)	REDACTED PER	254.0313, GOV T C	JODE			
7 CAMPAIGN	AREA CODE P	HONE NUMBER	EXTENSION			
TREASURER PHONE	(713) 278-0800					
FILONE						
8 REPORT						
TYPE	January 15	X 30th day before	e election	Runoff	15th day after ca	mpaign treasurer
				L	appointment (offi	ceholder only)
	July 15	8th day before	election	Exceeded modified	Final Report (Att	ach C/OH-FR)
				reporting limit	_	
9 PERIOD	Month Day Ye	ar		Month Day	Year	
COVERED			IROUGH	,		
	07/01/2024	IF	IROUGH	09/26/202	.4	
10 ELECTION	ELECTION DATE	≡   _		ELECTION TYPE		
	Month Day Ye	ear P	rimary	Runoff	Other	
	11/05/2024					
		XG	ieneral	Special		
11 OFFICE	OFFICE HELD (if any)	<b>I</b>		12 OFFICE SOUGHT	(if known)	
	District Judge District	61 Harris		District Judge Di		
		~~ 7				
		GO	O PAGE 2			
Forms provided by Te	exas Ethics Commission	www.et	hics.state.tx.us	6	Vers	ion V4.1.0.48da51f7

### JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 53

L

13 C / OH NAME	Phillips, Fredericka N	I. (The Honorable)	14 Filer ID 00066411	(Ethics Com	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expend These expenditures may have been made withou d officeholders are required to report this informati	it the candidate's or offic	ceholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	X GENERAL	Bay Area Democratic Movement			
		COMMITTEE ADDRESS			
	SPECIFIC	PO Box 590383			
		Houston, TX 77259			
		COMMITTEE CAMPAIGN TREASURER NAME			
		Aguilar, Kathryn			
		COMMITTEE CAMPAIGN TREASURER ADDR PO Box 590383	255		
		LO DOY 290302			
		Houston, TX 77259			
16 CONTRIBUTION	1. TOTAL UNITEM	ZED POLITICAL CONTRIBUTIONS(OTHER TH	AN PLEDGES LOANS		
TOTALS		ES OF LOANS, OR CONTRIBUTIONS MADE EL		\$	0.00
		ICAL CONTRIBUTIONS		\$	56,129.50
EXPENDITURE		PLEDGES, LOANS, OR GUARANTEES OF LOA ZED POLITICAL EXPENDITURES	NS)		
TOTALS				\$	0.00
		ICAL EAPENDITURES		\$	69,389.06
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$	151,682.30
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A TING PERIOD	S OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code	all information required		
		The Honor	able Fredericka M. P	hillips	
		Signature	of Candidate or Officeh	older	
AFFIX NO	TARY STAMP / SEAL AB	DVE			
Sworn to and subs	cribed before me, by the s	aid	, this the		day
		ertify which, witness my hand and seal of office.	·		
Signature of office	cer administering oath	Printed name of officer administering oath	Title of offic	er administeri	ing oath
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V	4.1.0.48da51f

#### SUBTOTALS - JC/OH

### FORM JC/OH COVER SHEET PG 3

3 of 53

18 FILER NAM Phillips, Ere	E edericka M. (The Honorable)	<b>19</b> Filer ID 00066411	(Ethics Commission Filers)
20 SCHEDULE		00000111	
NAME OF S	CHEDULE		SUBTOTAL AMOUNT
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		<b>\$</b> 51,250.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		<b>\$</b> 4,879.50
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	5	\$ 69,389.06
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	DNS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$

The Instruc	ction Guide explains how to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 1/9 Rpt: 4/53
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Phillips, Fred	lericka M. (The Honorable)		00066411
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
09/17/2024	Adams, Will		\$1,000.00
	6 Contributor address; City; State; Zip Code		
	Katy, TX 77494	1	
	Principal Occupation	9 Contributor's Job Title	
Law		Lawyer	
10 Contributor's e		<b>11</b> Law firm of contributor's sp	oouse (if any)
The Adams I			
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	١	Amount of Contribution (\$)
08/30/2024	Ahmad Zavitsanos and Mensing PLLC	)	\$5,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77010		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	mployer/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 (\$)
08/04/2024	Ahmad, Joe		\$5,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77019		
	Principal Occupation	Contributor's Job Title	
lawyer		lawyer	
	mployer/law firm	Law firm of contributor's sp	oouse (if any)
AZA			
It contributor is	s a child, law firm of parent(s) (if any)		
Forms provided	hy Texas Ethics Commission www.ethic	s state tx us	Version V4 1 0 48da51f7

The Instrue	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 2/9 Rpt: 5/53
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Phillips, Fred	lericka M. (The Honorable)		00066411
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
08/29/2024	Allen, Susanna		\$500.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77002		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Law		Lawyer	
10 Contributor's e		11 Law firm of contributor's sp	bouse (if any)
Yetter Colem			
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 (\$)
08/30/2024	Armstrong, Scott		\$5,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77092		
	Principal Occupation	Contributor's Job Title	
Law		Lawyer	
	employer/law firm	Law firm of contributor's sp	oouse (if any)
	ee & Baker LLP		
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
08/27/2024	Bryant, Terry	······································	\$750.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77024		
Contributor's F	Principal Occupation	Contributor's Job Title	
law		Lawyer	
	employer/law firm	Law firm of contributor's sp	oouse (if any)
Terry Bryant			
If contributor is	s 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	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 3/9 Rpt: 6/53
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Phillips, Fred	lericka M. (The Honorable)		00066411
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	)	7 Amount of Contribution (\$)
08/04/2024	Byrd, Cameron		\$5,000.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77010		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Law		Lawyer	
10 Contributor's e	employer/law firm	<b>11</b> Law firm of contributor's sp	bouse (if any)
AZA			
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 (\$)
09/06/2024	Chandler, Troy		\$1,000.00
	Contributor address; City; State; Zip Code		
	Bellaire, TX 77401		
	Principal Occupation	Contributor's Job Title	
Law		Lawyer	
Contributor's e	employer/law firm	Law firm of contributor's sp	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 (\$)
08/20/2024	Cone, Misty		\$1,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77007		
Contributor's F	Principal Occupation	Contributor's Job Title	•
Law		Lawyer	
	employer/law firm	Law firm of contributor's sp	bouse (if any)
Cone PLLC			
If contributor is	s 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 Instruc	tion Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 4/9 Rpt: 7/53
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Phillips, Fred	ericka M. (The Honorable)		00066411
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
09/11/2024	Davis, Joshua		\$250.00
	6 Contributor address; City; State; Zip Code		
<b>0</b> Contributorio D	Houston, TX 77002	Contributorio Job Title	
Law	rincipal Occupation	9 Contributor's Job Title Lawyer	
10 Contributor's e	mplover/law firm	11 Law firm of contributor's sp	nouse (if any)
Davis Law G		Law Infin of contributors sp	
	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/12/2024	Glaze, Jordan	)	\$1,000.00
	Contributor address; City; State; Zip Code		
	Gilmer, TX 75644		
Contributor's P	rincipal Occupation	Contributor's Job Title	
Law		Lawyer	
Contributor's e	mployer/law firm	Law firm of contributor's sp	oouse (if any)
Glaze Garret	t		
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 (\$)
08/14/2024	Hall, Benjamin		\$1,000.00
	Contributor address; City; State; Zip Code		
	Heuster TV 77000		
O antributaria D	Houston, TX 77006	Operate ibertanda dala Tida	
Law	rincipal Occupation	Contributor's Job Title Lawyer	
	mployer/law firm	Law firm of contributor's sp	nouse (if any)
The Hall Law		Law Infit of contributor 3 Sp	
	a child, law firm of parent(s) (if any)		
Forms provided b	v Texas Ethics Commission www.ethic	s.state.tx.us	Version V4.1.0.48da51f7

The Instruc	tion Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 5/9 Rpt: 8/53
2 FILER NAME Phillips, Fred	ericka M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00066411
09/18/2024	<ul> <li>Full name of contributor out-of-state PAC (ID#:_ Hardin, Rusty</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$1,000.00
	Houston, TX 77010		
8 Contributor's P Law	rincipal Occupation	9 Contributor's Job Title Lawyer	
10 Contributor's er	mployer/law firm & Associates	11 Law firm of contributor's sp	ouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)		
Date 09/24/2024	Full name of contributor out-of-state PAC (ID#:_ Hunton Andrews Kurth Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$2,500.00
Contributor's P	Houston, TX 77002 rincipal Occupation	Contributor's Job Title	
Contributor's er	mployer/law firm	Law firm of contributor's sp	ouse (if any)
If contributor is	a child, law firm of parent(s) (if any)		
Date 08/02/2024	Full name of contributor out-of-state PAC (ID#:_ Kherkher, Steven Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$2,500.00
	Houston, TX 77098		
Contributor's P	rincipal Occupation	Contributor's Job Title lawyer	
Contributor's e Kherkher Gar	mployer/law firm rcia	Law firm of contributor's sp	ouse (if any)
If contributor is	a child, law firm of parent(s) (if any)	I	
	v Texas Ethics Commission www.ethic	s state tx us	Version V4 1 0 48da51f7

The Instruc	ction Guide explains how to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 6/9 Rpt: 9/53
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Phillips, Fred	ericka M. (The Honorable)		00066411
	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
09/03/2024	McMillan, Chance		\$1,500.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77002		
8 Contributor's F	rincipal Occupation	9 Contributor's Job Title	•
Law		Lawyer	
10 Contributor's e		11 Law firm of contributor's sp	bouse (if any)
The McMillar			
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 (\$)
08/05/2024	Mensing, Todd		\$5,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77010		
Contributor's F	Principal Occupation	Contributor's Job Title	
law		Lawyer	
	mployer/law firm	Law firm of contributor's sp	bouse (if any)
AZA			
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 (\$)
09/18/2024	Musslewhite, Jeffrey	,	\$250.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77027		
Contributor's F	rincipal Occupation	Contributor's Job Title	
Law		Lawyer	
	mployer/law firm	Law firm of contributor's sp	bouse (if any)
	sslewhite Ltd LLP		
If contributor is	s 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 Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 7/9 Rpt: 10/53
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Phillips, Fred	lericka M. (The Honorable)		00066411
4 Date 09/10/2024	5 Full name of contributor out-of-state PAC (ID#:_ Paxton, Richard		7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77056		
	Principal Occupation	9 Contributor's Job Title	
Law		Lawyer	
10 Contributor's e Paxton Law I		<b>11</b> Law firm of contributor's sp	bouse (if any)
	a child, law firm of parent(s) (if any)		
	s a child, law little of parend(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
07/18/2024	Peckham, Charles		\$250.00
	Contributor address; City; State; Zip Code		1
	Houston, TX 77063		
	Principal Occupation	Contributor's Job Title	
Lawyer		Lawyer	
Contributor's e Peckham Ma	mployer/law firm	Law firm of contributor's sp	bouse (if any)
	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
08/20/2024	Roberts , Sean		\$2,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77004		
Contributor's F	Principal Occupation	Contributor's Job Title	
Law		Lawyer	
	mployer/law firm	Law firm of contributor's sp	bouse (if any)
Roberts Marl			
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 Instrue	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 8/9 Rpt: 11/53
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Phillips, Fred	dericka M. (The Honorable)			00066411
4 Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
09/04/2024	The Law Offices of Hilda I			\$1,000.00
	6 Contributor address; City; St			
	Houston, TX 77018			
Contributor's	Principal Occupation		9 Contributor's Job Title	
<b>b</b> Contributor 3 P				
10 Contributor's e	employer/law firm		<b>11</b> Law firm of contributor's sp	pouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if a	iny)		
Date	Full name of contributor	out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
08/29/2024	The Nech Law Firm PC			\$250.00
	Contributor address; City; St			
	Houston, TX 77007			
Contributor's F	Principal Occupation		Contributor's Job Title	
Contributor's d	employer/law firm		Law firm of contributor's sp	acuso (if any)
Contributor 3 e	anployen/law initi		Law IIII of contributor 3 S	
If contributor is	s a child, law firm of parent(s) (if a	iny)		
		.,		
Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
08/04/2024	Uddin, Monica			\$5,000.00
	Contributor address; City; St	ate; Zip Code		
	Houston, TX 77010			
	Principal Occupation		Contributor's Job Title	
law			lawyer	
AZA	employer/law firm		Law firm of contributor's sp	bouse (if any)
	s a child, law firm of parent(s) (if a	nnv)		
		uiy)		
Forme provided	by Texas Ethics Commission	hanna othio	s state ty us	Version V/4 1 0 48da51f7

ction Guide explains how to complete t	this form.	1 Total pages Schedule A(J)1: Sch: 9/9 Rpt: 12/53
		<b>3</b> Filer ID (Ethics Commission Filers)
dericka M. (The Honorable)		00066411
5 Full name of contributor out-of-state PAC	C (ID#:)	7 Amount of Contribution (\$)
Wetwiska, Jim		\$2,500.00
6 Contributor address; City; State; Zip Code		
Houston, TX 77014		
Principal Occupation	9 Contributor's Job Title	L
	Lawyer	
employer/law firm	11 Law firm of contributor's s	oouse (if any)
s a child, law firm of parent(s) (if any)		
	) (ID#:	Amount of Contribution (\$)
	)	\$500.00
Houston, TX 77006		
	Contributor's Job Title	
emplover/law firm		pouse (if any)
	dericka M. (The Honorable)   5 Full name of contributor   wetwiska, Jim   6 Contributor address; City; State; Zip Code   Houston, TX 77014   Principal Occupation   employer/law firm   s a child, law firm of parent(s) (if any)	dericka M. (The Honorable)         5       Full name of contributor         wetwiska, Jim         6       Contributor address; City; State; Zip Code         Houston, TX 77014         Principal Occupation         9       Contributor's Job Title         Lawyer         employer/law firm         Full name of contributor         out-of-state PAC (ID#:)         Williams, Winfred         Contributor address; City; State; Zip Code         Houston, TX 77006         Principal Occupation         Contributor's Job Title         Lawyer         employer/law firm         Law firm of contributor's Job Title         Lawyer         employer/law firm         Law firm of contributor's sp         Firm

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A2:				
			•••••		Sch: 1/1 Rpt: 13/53				
2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Phillips, Fre	dericka M. (The Honorable)			00066411				
4	TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$					
5	Date 08/29/2024	<ul> <li>6 Full name of contributor out-of-state PAC (ID#:</li> <li>Steptoe LLC</li> <li>7 Contributor address; City; State; Zip Code</li> </ul>	)	8	Amount of <b>9</b> In-kind contribution contribution (\$) description \$4,879.501 food beverages decorations for fundraiser event				
		Houston, TX 77002			Check if travel outside of Texas. Complete Schedule T.				
10	Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JL	JDICIAL) (See instructions)				
12	Contributor's	principal occupation (FOR JUDICIAL)	<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)						
14	Contributor's	employer/law firm (FOR JUDICIAL)	<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)						
16	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							

	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	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: 1/40 Rpt: 14/53	Phillips, Fredericka M. (The Honorable)	00066411						
4	Date	Payee name							
	08/20/2024	Advantage Communication Consultants							
6	Amount (\$)	Payee address; City; State; Zip Code							
	\$25,040.21	PO Box 131743							
		Houston, TX 77219							
8	PURPOSE								
ľ	OF		tside of Texas. Complete Schedule T.						
	EXPENDITURE		X, officeholder living expense						
		Campaign billb	poards						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/15/2024	Amazon							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$338.60	1516 Second Ave							
		Seattle, WA 98101							
	PURPOSE OF	(b) Description							
	EXPENDITURE		itside of Texas. Complete Schedule T. "X, officeholder living expense						
		court decor an							
			a capp						
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held						
	expenditure to benefit C/OI								
_	Date	Payee name							
	08/28/2024	Anonymous Cafe							
_	Amount (\$)	Payee address; City; State; Zip Code							
	\$15.37	3701 Kirby							
	φ10.07	Unit 160							
		Houston, TX 77098							
	PURPOSE OF	a) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE		itside of Texas. Complete Schedule T. "X, officeholder living expense						
		campaign mee							
-	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held						
	expenditure to benefit C/OI								

		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: 2/40 Rpt: 15/53		Phillips, Fredericka M. (The Honorable	)			00066411					
4	Date	5	Payee name	-		<u> </u>						
	09/05/2024		Association of Women Attorneys									
6	Amount (\$)	7	Payee address; City; State;	; Zip Co	de							
	\$35.00		2450 Louisiana									
			ste 400									
			Houston, TX 77006									
8	PURPOSE	(2)			(b) Description							
ľ	OF	(a)	Category (See Categories listed at the top of this schu Fees	edule)	(b) Description Check if travel	outs	ide of Texas. Complete Schedule T.					
	EXPENDITURE		1663				, officeholder living expense					
					membership	fee	9					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name C	Office sou	Jht		Office held					
	Date		Payee name									
	07/03/2024		Bay Area Democrat Movement									
⊢	Amount (\$)		Payee address; City; State;	; Zip Co	de							
	\$150.00		PO Box 590383									
			Houston, TX 77259									
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description							
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Committee									
			Candidate/Officeholder/Political Comm	littee	donation	I, I A	, oncenduer iving expense					
					uonation							
	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	t		Office held					
	expenditure to benefit C/OI				jiit		Once neu					
_	Data	_										
	Date		Payee name									
	08/21/2024		Black Walnut Cafe									
	Amount (\$)			; Zip Co	de							
	\$66.83		5512 Memorial									
			Houston, TX 77007									
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description							
	OF EXPENDITURE		Food/Beverage Expense				ide of Texas. Complete Schedule T.					
							a, officeholder living expense					
					campaign lur	ich						
_				D#:								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	Int		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 Fees Food/Beverage Expense Gift/Awards/Memorials Exp ttee Legal Services The Instruction Guide		Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Travel in District Travel Out of Dist	quipment & Related Expense		
1	Total pages Schedule F1:	2 =					2	Filer ID	(Ethics Commission Filers)		
-	Sch: 3/40 Rpt: 16/53		hillips, Fredericka M. (The Ho	onorable	)			00066411			
4	Date 08/26/2024		ayee name hickfila								
6	Amount (\$) \$232.74	1	ayee address; City; 4335 East Sam Houston Pkw ouston, TX 77044		Zip Co	le					
8	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the to bod/Beverage Expense	op of this sch	edule)		ı, TX,	ide of Texas. Comp , officeholder living SPONSOR			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	ht		Office he	ld		
	Date	P	ayee name								
	07/25/2024	С	lubs In Action								
	Amount (\$) \$250.00		ayee address; City; 1910 Carillon Forest Dr	State;	Zip Coo	le					
		A	tascosita, TX 77346								
	PURPOSE OF EXPENDITURE	С	ategory (See Categories listed at the to ontributions/Donations Made andidate/Officeholder/Politica	вy	,			ide of Texas. Comp , officeholder living			
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	ht		Office he	ld		
	Date	Р	ayee name								
	08/26/2024	D	rexel Society Houston								
	Amount (\$) \$100.00		ayee address; City; 5110 Beechnut	State;	Zip Co	le					
			ouston, TX 77083								
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the to dvertising Expense	op of this sch	edule)			ide of Texas. Comp , officeholder living			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Dffice sou	ht		Office he	ld		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense - Gift/Awards/Memorials Expense Printing Expense Committee 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	· · · ·		•	3	Filer ID (Ethics Commission Filers)			
-	Sch: 4/40 Rpt: 17/53		Phillips, Fredericka M. (The Honorable)	)			00066411			
4	Date	5	Payee name							
	08/03/2024		Executive Car Service							
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de					
	\$130.80		unknown							
			Los Angeles, CA 90045							
_	DUDDOOF	<u> </u>	-		(I-) _ · · ·					
8	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	(b) Description	outei	ide of Texas. Complete Schedule T.			
	EXPENDITURE		Travel Out of District				, officeholder living expense			
					airport transp					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O	)ffice sou	Jht		Office held			
	Date		Payee name							
	08/06/2024		Executive Car Service							
	Amount (\$)	-	Payee address; City; State;	Zip Co	10					
	\$124.80		unknown	Zip Co						
	Φ124.00									
			Los Angeles, CA 90045							
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Travel Out of District				ide of Texas. Complete Schedule T.			
					airport transfe		, officeholder living expense			
	Complete ONIL V if direct		Candidate/Officeholder name O	)ffice sou	. ht		Office held			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF			MICE SOU	jin		Onice neid			
	Date		Payee name							
	09/22/2024		Fadis							
	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$27.14		6365 Westheimer							
			Houston, TX 77057							
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Food/Beverage Expense				ide of Texas. Complete Schedule T.			
							, officeholder living expense			
					campaign lur	ICII				
		L	and the foff and a later							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	Int		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 Food/I Gift/Av mittee Legal	Expense Beverage Expense wards/Memorials Expense Services Instruction Guide explains	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				<b>3</b> Filer ID (Ethics Commission Filers)					
	Sch: 5/40 Rpt: 18/53		cka M. (The Honorabl	e)		00066411					
4	Date 07/10/2024	Payee name Four Seasons									
6	Amount (\$) \$1,104.86	Payee address; 300 S Doheny D Los Angeles, CA	)r	e; Zip Code	9						
8	PURPOSE OF EXPENDITURE	Category <sub>(See Cate</sub> Travel Out of Dis	egories listed at the top of this so strict	hedule) (I		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense ges CLE					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeho	lder name	Office sough	it	Office held					
	Date	Payee name									
	08/07/2024	Four Seasons									
	Amount (\$) \$1,016.72	Payee address; 300 S Doheny D		e; Zip Code	)						
		Los Angeles, CA	90048								
	PURPOSE OF EXPENDITURE	Category <sub>(See Cate</sub> Travel Out of Dis	egories listed at the top of this so Strict	chedule) (I		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense E					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeho	lder name	Office sough	t	Office held					
	Date	Payee name									
	08/04/2024	Frontrunners Str	rategic Management S	Services							
	Amount (\$) \$5,000.00	Payee address; PO Box 8176	City; State	e; Zip Code	2						
		Houston, TX 772									
	PURPOSE OF EXPENDITURE	Category <sub>(See Cate</sub> Consulting Expe	egories listed at the top of this so INSE	chedule) (I		I outside of Texas. Complete Schedule T. in, TX, officeholder living expense DNSulting					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officehol	lder name	Office sough	t	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 Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains h	Office Ove 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	· · · ·		- <b>-</b>	3	Filer ID (Ethics Commission Filers)		
-	Sch: 6/40 Rpt: 19/53		Phillips, Fredericka M. (The Honorable)	)			00066411		
4	Date	5	Payee name						
	09/01/2024		Frontrunners Strategic Management Se	ervices					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de				
	\$7,000.00		PO Box 8176						
			Houston, TX 77288						
8	PURPOSE	<u> </u>		<u> </u>	(h) Description				
0	OF		Category (See Categories listed at the top of this sche Consulting Expense	edule)	(b) Description	outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE	`	Consuling Expense				, officeholder living expense		
					consulting				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	)ffice sou	ght		Office held		
	Date		Payee name						
	09/16/2024		Frontrunners Strategic Management Se	ervices					
-	Amount (\$)			Zip Co					
	\$1,000.00	I	PO Box 8176		ue				
	Φ1,000.00	'	PO B0x 01/0						
			Houston, TX 77288						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Consulting Expense				ide of Texas. Complete Schedule T.		
							, officeholder living expense		
					consulting an		ampaign workers		
		L							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	Office sou	gnt		Office held		
	Date		Payee name						
	07/10/2024		Frost Bank						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$8.00		6750 West Loop South						
			·						
			Houston, TX 77401						
	PURPOSE	(a) (	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Fees				ide of Texas. Complete Schedule T.		
						, TX,	, officeholder living expense		
					bank fee				
	Complete ONILV & diversit	Ĺ	andidate/Officeholder remain	fier cri	~h+		Office hold		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	Office sou	gnt		Office held		

		EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-		Office Ove Polling Ex 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)				
		-	The Instruction Guide e	xplains i	now to co	npiete this form.	1					
1	Total pages Schedule F1: Sch: 7/40 Rpt: 20/53	2	Phillips, Fredericka M. (The Hor	norable)	)		3	Filer ID     (Ethics Commission Filers)       00066411				
4	Date	5	Payee name				•					
	09/11/2024		Frost Bank									
6	Amount (\$)	7	Payee address; City; State; Zip Code									
	\$4.00		6750 West Loop South									
			Houston, TX 77401									
8	PURPOSE	(a)	Category (See Categories listed at the top	- 6 41-1 1-		(b) Description						
ľ	OF	(~)	Category (See Categories listed at the top Fees	of this sche	edule)		outs	ide of Texas. Complete Schedule T.				
	EXPENDITURE							, officeholder living expense				
						bank fee						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	C	Office sou	ght		Office held				
	Date		Payee name									
	07/08/2024		GoDaddy									
_	Amount (\$)		Payee address; City;	State	Zip Co	de						
	\$18.11			olulo,	210 00							
	φ10.11		14455 N Hayden Rd									
			Ste 219									
			Scottsdale, AZ 85260									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top Advertising Expense	of this sche	edule)			ide of Texas. Complete Schedule T. , officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	C	Office sou	ght		Office held				
	Date		Payee name									
	08/07/2024		GoDaddy									
	Amount (\$)		Payee address; City;	Stato <sup>.</sup>	Zip Co							
	\$18.11		14455 N Hayden Rd	State,	210 00							
	Ψ10.11		-									
			Ste 219									
			Scottsdale, AZ 85260									
	PURPOSE	(a)	Category (See Categories listed at the top	of this sche	edule)	(b) Description						
	OF EXPENDITURE		Advertising Expense					ide of Texas. Complete Schedule T. , officeholder living expense				
-	Complete ONLV if direct	Ļ	andidato/Officaboldor name	~		abt		Office hold				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	Jur		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 Fees Food/Beverage Expense Gift/Awards/Memorials Ex	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	ILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 8/40 Rpt: 21/53	F	Phillips, Fredericka M. (The H	lonorable	)			00066411			
4	Date 09/08/2024		Payee name GoDaddy								
6	Amount (\$) \$18.11	-	Payee address; City; .4455 N Hayden Rd Ste 219 Scottsdale, AZ 85260	State;	Zip Coo	le					
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the f Advertising Expense	top of this sch	edule)			ide of Texas. Complete Schedule T. , officeholder living expense			
9	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office souç	ht		Office held			
	Date	F	Payee name								
	08/19/2024	H	IEB								
	Amount (\$) \$190.45	-	Payee address; City; .2680 W Lake Houston Houston, TX 77044	State;	Zip Coo	le					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the f Food/Beverage Expense	top of this scho	edule)	Check if Austin	ı, TX,	ide of Texas. Complete Schedule T. , officeholder living expense S and SupplieS			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held			
	Date	F	Payee name								
	08/19/2024		IEB								
	Amount (\$) \$43.54		Payee address; City; 2680 W Lake Houston	State;	Zip Coo	le					
		ŀ	Houston, TX 77044								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the f Food/Beverage Expense	top of this sch	edule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense S			
	Complete ONLY 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		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Over Polling Exp Printing Exp Salaries/Wa	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: 9/40 Rpt: 22/53		Phillips, Fredericka M. (The Honorable)				00066411				
4	Date 09/15/2024		Payee name HEB								
6	Amount (\$) \$324.00		Payee address; City; State; 12680 W Lake Houston Houston, TX 77044	Zip Coo	le						
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Food/Beverage Expense	dule)		n, TX,	de of Texas. Complete Schedule T. , officeholder living expense d supplies				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	ffice soug	ht		Office held				
	Date		Payee name								
	09/23/2024		HEB								
	Amount (\$) \$59.76		12680 W Lake Houston	Zip Coo	e						
			Houston, TX 77044								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Food/Beverage Expense	dule)			de of Texas. Complete Schedule T. officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name O	ffice soug	ht		Office held				
	Date		Payee name								
	08/23/2024		Harris County Democratic Party								
	Amount (\$) \$4,500.00		Payee address; City; State; 4619 Lyons	Zip Coo	le						
			Houston, TX 77020								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Contributions/Donations Made By Candidate/Officeholder/Political Commi	,		n, TX,	de of Texas. Complete Schedule T. officeholder living expense ISOI				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	ffice 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		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explain	Office Ove Polling Ex Printing E Salaries/V	erhead pense xpens Vages	e /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:	12	· · · · · · · · · · · · · · · · · · ·	13 1101 10 00	in pro		5	Filer ID (Ethics Commission Filers)	
1	Sch: 10/40 Rpt: 23/53		Phillips, Fredericka M. (The Honorat	ole)			3	00066411	
4	Date	5	Payee name						
	09/12/2024		HomeGoods						
6	Amount (\$) \$795.56		Payee address; City; Sta 7055 FM 1960 East Humble, TX 77345	ite; Zip Co	ode				
8	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE		Office Overhead/Rental Expense	Schedule)		Check if travel of	, тх,	ide of Texas. Complete Schedule T. , officeholder living expense I <b>I'C</b>	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ight			Office held	
	Date		Payee name						
	07/16/2024		Houston Airport System						
	Amount (\$)		Payee address; City; Sta	te; Zip Co	ode				
	\$32.60		2800 N Terminal Rd Houston, TX 77032						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Travel Out of District	schedule)	(b)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ight			Office held	
	Date		Payee name						_
	08/03/2024		Houston Airport System						
	Amount (\$) \$87.00	I	Payee address; City; Sta 2800 N Terminal Rd	te; Zip Co	ode				
			Houston, TX 77032						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this : Travel Out of District	schedule)	(b)		, тх,	ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ight			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	<b>3</b> Filer ID (Ethics Commission Filers)				
	Sch: 11/40 Rpt: 24/53	Phillips, Fredericka M. (The Honorable)	00066411				
4	Date 08/15/2024	5 Payee name Houston LGBTQ+ Political Caucus					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
U	\$2,500.00						
<u> </u>	DUDDOCE						
8	PURPOSE OF EXPENDITURE	Contributions/Donations Made By					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	07/23/2024	JW Marriott					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$2,730.73						
L	DUDDOCE	Nashville, TN 37203					
	PURPOSE OF EXPENDITURE		ıtside 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				
	Date	Payee name					
	08/06/2024	Klatch Coffee					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$6.57	700 World Way					
		Los Angeles, CA 90045					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense LE				
	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 Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explains h	Office Ove 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				2	Filer ID (Ethics Commission Filers)
1	Sch: 12/40 Rpt: 25/53	2	Phillips, Fredericka M. (The Honorable)	)		J	00066411
4	Date	5	Payee name				
	09/12/2024		Kroger				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le		
	\$46.74		14221 E Sam Houston Pkwy N				
			Houston, TX 77044				
8	PURPOSE	(2)			(b) Decoription		
ľ	OF	(u)	Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)	(b) Description Check if travel	outsi	ide of Texas. Complete Schedule T.
	EXPENDITURE		r oou/deverage Expense				, officeholder living expense
					jury room sna	ack	S
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	Jht		Office held
	Date		Payee name				
	07/30/2024		Lactson, Nikole				
				Zin Co			
	Amount (\$)			Zip Co	le		
	\$125.00		2802 Ruth				
			Houston TX 77004				
	BUBBAAE		Houston, TX 77004		<i>a</i> x <i>x x x x x x x x x</i>		
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description	outei	ide of Texas. Complete Schedule T.
	EXPENDITURE		Salaries/Wages/Contract Labor				, officeholder living expense
					photoshoot s		
	Complete ONLY if direct	(	Candidate/Officeholder name O	office soug	Jht		Office held
	expenditure to benefit C/OI	H					
-	Date		Payee name				
	07/30/2024		Lillie Dor, Meme				
	Amount (\$)			Zip Co	10		
	\$65.00		10350 S Post Oak Rd				
	\$03.00						
			Ste 613				
			Houston, TX 77035				
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Salaries/Wages/Contract Labor				ide of Texas. Complete Schedule T.
					photoshoot s		, officeholder living expense
					μιστοσπουί S	all	
	Complete ONILV & diversit	L	Condidate/Office halder range	fiers	.bt		Office held
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH							

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens nmittee Legal Services The Instruction Guide ex		Office Over Polling Exp Printing Exp Salaries/Wa	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					3	Filer ID (Ethics Commission Filers)
-	Sch: 13/40 Rpt: 26/53	2	Phillips, Fredericka M. (The Hond	orable	)			00066411
4	Date	5	Payee name					
	07/12/2024		Mailchimp					
6	Amount (\$)	7	Payee address; City;	State;	Zip Coo	le		
	\$57.56		675 Ponce De Leon Ave NE					
			Atlanta, GA 30308					
8	PURPOSE	(2)				(b) Description		
ľ	OF	(a)	Category (See Categories listed at the top o Advertising Expense	f this sche	edule)		outs	ide of Texas. Complete Schedule T.
	EXPENDITURE							, officeholder living expense
						campaign en	nail	service
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	ht		Office held
	Date		Payee name					
	08/12/2024		Mailchimp					
_	Amount (\$)		Payee address; City;	State:	Zip Coo	le		
	\$57.56		675 Ponce De Leon Ave NE	o tato,	p 000			
	\$61.00							
			Atlanta, GA 30308					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top o Advertising Expense	f this sch	edule)		ı, TX	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Office soug	ht		Office held
	Date		Payee name					
	09/12/2024		Mailchimp					
	Amount (\$)		Payee address; City;	State:	Zip Coo	le		
	\$57.56		675 Ponce De Leon Ave NE	olulo,	210 000			
	\$57.50							
			Atlanta, GA 30308					
	PURPOSE	(a)	Category (See Categories listed at the top o	f this sch	edule)	(b) Description		
	OF EXPENDITURE		Advertising Expense					ide of Texas. Complete Schedule T.
								, officeholder living expense
						email service	;	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		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	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:		<b>3</b> Filer ID (Ethics Commission Filers)					
1	Sch: 14/40 Rpt: 27/53	Phillips, Fredericka M. (The Honorable)	00066411					
4	Date 09/12/2024	Payee name Marshalls						
6	Amount (\$)	Payee address; City; State; Zip Code						
	\$194.80	14263 E Sam Houston Parkway N						
		Houston, TX 77044						
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Of					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	07/05/2024	Martin, Chester						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$200.00	unknown Houston, TX 77004						
	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					
	Date	Payee name						
	07/30/2024	Martin, Chester						
	Amount (\$) \$250.00	Payee address; City; State; Zip Code unknown						
		Houston, TX 77004						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense for campaign photoshoot					
	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		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: 15/40 Rpt: 28/53	Phillips, Fredericka M. (The Honorable)	00066411			
4	Date	5 Payee name				
	09/24/2024	Mexican American Bar Association of Houston				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$1,500.00	PO Box 303				
		Houston, TX 77001				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Event Expense Check if travel ou	Itside of Texas. Complete Schedule T.			
			rX, officeholder living expense			
		event table spo	UISU			
_	Complete ONIL V if direct	Candidata/Office.halder.nome	Office held			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	09/03/2024	Meyerland Area Democrats Club				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$500.00 unknown					
		Houston, TX 77096				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE		ıtside of Texas. Complete Schedule T. IX, officeholder living expense			
		donation				
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/OI					
	Date	Payee name				
	07/23/2024	Milk & Honey				
-	Amount (\$)	Payee address; City; State; Zip Code				
	\$72.63	214 11th Avenue S				
	¢12.00					
		Nashville, TN 37203				
	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			
		meal during Cl				
		Canalidate/Officeholder.non				
	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 Food/Beverage Expense Gift/Awards/Memorials Expense	Office Over Polling Exp Printing Exp Salaries/Wa	ense ges/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	Filer ID (Ethics Commission Filers)					
	Sch: 16/40 Rpt: 29/53		Phillips, Fredericka M. (The Honorable)				00066411		
4	Date 07/26/2024		5 Payee name NEWGeneration Golf						
6	Amount (\$) \$625.00		Payee address; City; State; 3933 N Main St Houston, TX 77009	Zip Coc	e				
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sched Food/Beverage Expense	dule)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name Of	ffice soug	ht		Office held		
	Date		Payee name						
	09/21/2024		Navy Blue						
	Amount (\$) \$275.17		Payee address; City; State; 2445 Times Blvd	Zip Coc	e				
		<u> </u>	Houston, TX 77005						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sched Food/Beverage Expense	dule)		I, TX	ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Of	ffice soug	ht		Office held		
	Date		Payee name						
	07/21/2024		Oak Forest Area Democrats						
	Amount (\$) \$250.00		Payee address; City; State; 403 Yale Oaks Ln	Zip Coc	e				
			Houston, TX 77091	i					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this scheor Contributions/Donations Made By Candidate/Officeholder/Political Commit	uulo)			ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name Of	ffice 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		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ove 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	FILER NAME		-	3	Filer ID (Ethics Commission Filers)
	Sch: 17/40 Rpt: 30/53		Phillips, Fredericka M. (The Honorable)	)			00066411
4	Date 08/16/2024		Payee name Olive Garden				
6	Amount (\$) \$85.01		Payee address; City; State; 14231 E Sam Houston Parkway N Houston, TX 77044	Zip Co	le		
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	lht		Office held
	Date		Payee name				
	09/10/2024		Pappadeaux Seafood Kitchen				
	Amount (\$) \$778.60		Payee address; City; State; 1001 Avenida de las Americas	Zip Co	le		
			Houston, TX 77010				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense ; meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	Jht		Office held
	Date		Payee name				
	09/13/2024		Pappadeaux Seafood Kitchen				
	Amount (\$) \$85.00		Payee address; City; State; 1001 Avenida de las Americas	Zip Co	le		
			Houston, TX 77010				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	Jht		Office held

			EXPENDITURE CATEGOR	RIES FOR	R BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ove 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: 18/40 Rpt: 31/53	2	Phillips, Fredericka M. (The Honorable)	)			00066411	
4	Date 09/13/2024	5 Payee name Pappasitos						
6	Amount (\$)	7		Zip Co	do			
U	\$37.45		1600 Lamar St Houston, TX 77010	210 000	ue			
•	DUDDOCE	<u> </u>			(h) =			
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name O	office sou	ght		Office held	
	Date		Payee name					
	07/22/2024		Prince's Hot Chicken					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$47.30		5055 Broadway Nashville, TN 37203	·				
	DUDDOCE	(-)						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense E	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ght		Office held	
	Date		Payee name					
	07/03/2024		Sam, Stacy					
-	Amount (\$)	╞	-	Zip Co	de			
	\$500.00		1818 Fannin Speedway	•				
			#2203					
			Houston, TX 77045					
-	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE		Salaries/Wages/Contract Labor		Check if trave	n, TX	ide of Texas. Complete Schedule T. , officeholder living expense t coordinator	
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ght		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ommittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Gui	xpense	Office Overl Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	FILER NA	ME				3	Filer ID	(Ethics Commission Filers)
	Sch: 19/40 Rpt: 32/53		Fredericka M. (The I	Honorable	)			00066411	
4	Date 07/26/2024	Payee na Sam, Sta							
6	Amount (\$) \$1,000.00	#2203	dress; City; nnin Speedway TX 77045	State;	; Zip Cod	e			
8	PURPOSE OF EXPENDITURE		(See Categories listed at the Wages/Contract La		edule) (	Check if Austin	n, TX,	ide of Texas. Comp , officeholder living /coordinator	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/	Officeholder name	C	Office soug	ht		Office he	ld
	Date	Payee na	me						
	09/22/2024	South Te	exas College of Law						
	Amount (\$)	Payee ad	dress; City;	State;	; Zip Cod	e			
	\$1,950.00	1303 Sai Houston	n Jacinto TX 77002						
	PURPOSE OF EXPENDITURE	I) Category Event Ex	(See Categories listed at the pense	e top of this sche	edule) (		n, TX,	ide of Texas. Comp , officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/	Officeholder name	C	Office soug	ht		Office he	ld
	Date	Payee na	me						
	08/19/2024	Southwe	st Democrats						
	Amount (\$) \$250.00	Payee ad PO Box 2		State;	; Zip Cod	e			
		Bellaire,	TX 77402						
	PURPOSE OF EXPENDITURE	Contribu	(See Categories listed at the tions/Donations Mac e/Officeholder/Politi	de By	,			ide of Texas. Comp , officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/	Officeholder name	C	Office soug	ht		Office he	ld

	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 Expens ittee Legal Services The Instruction Guide ex		Office Overh Polling Expe Printing Exp Salaries/Wa	ense ges/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:	<b>2</b> F	ILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 20/40 Rpt: 33/53		hillips, Fredericka M. (The Hone	orable)	)			00066411
4	Date 08/21/2024		ayee name arget					
6	Amount (\$)		ayee address; City;	State	Zip Cod	2		
U	\$107.53	2	580 Shern St	State,	210 000	~		
			louston, TX 77007					
8	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the top o office Overhead/Rental Expense		edule) (	Check if Austin	ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense r and supplies
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		ndidate/Officeholder name	0	Office soug	nt		Office held
	Date	F	ayee name					
	09/15/2024	Т	arget					
	Amount (\$)	F	ayee address; City;	State;	Zip Cod	9		
	\$59.18		580 Shern St Iouston, TX 77007					
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the top o ffice Overhead/Rental Expense		edule) (			ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ndidate/Officeholder name	0	Office soug	nt		Office held
	Date	F	ayee name					
	09/04/2024	Т	exas Association of District Jud	ges				
	Amount (\$)	F	ayee address; City;	State;	Zip Cod	e		
	\$50.00	F	O Box 1748					
		A	ustin, TX 78767		i			
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the top o	f this sche	edule) (		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ndidate/Officeholder name	0	Office soug	nt		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     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:	FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 21/40 Rpt: 34/53	Phillips, Fredericka M. (The Honorable)	00066411				
4	Date 09/20/2024	Payee name Texas Association of District Judges					
6	Amount (\$) \$201.06	Payee address;City;State;Zip CodePO Box 1748Austin, TX 78767					
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense				
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	Texas Center for Judiciary					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$35.00	1210 San Antonio St Austin, TX 78701					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense DN				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	08/02/2024	Texas Center for Judiciary					
	Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 1210 San Antonio St					
		Austin, TX 78701					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. FX, 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		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:	· · · · ·	<b>3</b> Filer ID (Ethics Commission Filers)				
Ĺ	Sch: 22/40 Rpt: 35/53	Phillips, Fredericka M. (The Honorable)	00066411				
4	Date 08/21/2024	5 Payee name Texas Democratic Women of Harris County					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$700.00						
Ļ	DUDDOOF						
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 event sponsor						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	07/29/2024	Texas Gulf Coast Area Labor Foundation AFL-CIO					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$250.00	2506 Sutherland Houston, TX 77023					
	PURPOSE OF EXPENDITURE		uutside of Texas. Complete Schedule T. TX, officeholder living expense nt sponsor				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				
F	Date	Payee name					
	07/22/2024	The Baked Bear					
	Amount (\$) \$30.23	Payee address; City; State; Zip Code 1809 Division St					
		Nashville, TN 37203					
	PURPOSE OF EXPENDITURE		uutside of Texas. Complete Schedule T. TX, officeholder living expense CLE				
	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 C Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h		Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
							Filer ID (Ethics Commission Filers)	
						00066411		
4	Date 07/22/2024	5 Payee name The Cheesecake Factory						
6	Amount (\$) \$133.01	7 Payee address; City; State; Zip Code 2133 Green Hills Village Dr Nashville, TN 37215						
8	PURPOSE OF EXPENDITURE	OF Food/Beverage Expense			officeholder living expense			
9	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH							
	Date		Payee name					
09/24/2024			The Downtown Group					
	Amount (\$) \$50.00	ı	unknown	Zip Coo	le			
PURPOSE OF EXPENDITURE		(a) (	Event Expense		Check if Austin	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Iuncheon ticket		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF			Candidate/Officeholder name Office sought Office held					
	Date		Payee name					
	08/29/2024	'	The Lancaster					
	Amount (\$) \$10.83		Payee address; City; State; 701 Texas Ave	Zip Co	le			
	Houston, TX 77002							
PURPOSE OF EXPENDITURE			(a) Category (See Categories listed at the top of this schedule) Travel In District				de of Texas. Complete Schedule T. , officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			andidate/Officeholder name O	ffice sou	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	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:	· · · · ·	<b>3</b> Filer ID (Ethics Commission Filers)					
-	Sch: 24/40 Rpt: 37/53	Phillips, Fredericka M. (The Honorable)	00066411					
4	Date 09/08/2024	Payee name The Post Oak Hotel						
6	Amount (\$) \$23.80	<ul> <li>Payee address; City; State; Zip Code</li> <li>1600 W Loop S</li> <li>Houston, TX 77027</li> </ul>						
8	8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense parking							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	09/08/2024	The Post Oak Hotel						
	Amount (\$) \$20.16	Payee address; City; State; Zip Code 1600 W Loop S						
	PURPOSE	Houston, TX 77027         a) Category (See Categories listed at the top of this schedule)         (b) Description						
	OF EXPENDITURE	Food/Beverage Expense	outside of Texas. Complete Schedule T. TX, officeholder living expense eeting meal					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	07/16/2024	US Post Office						
	Amount (\$) \$63.00	Payee address; City; State; Zip Code 7205 Almeda						
		Houston, TX 77054						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense X renewal					
	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 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 Cabadula F1	2	· · ·		inpic		3	Filer ID (Ethics Commission Filers)		
T	Total pages Schedule F1: Sch: 25/40 Rpt: 38/53		Phillips, Fredericka M. (The Honorable)	)			3	Filer ID     (Ethics Commission Filers)       00066411		
4	Date	5	Payee name							
	09/07/2024		USPS							
6	Amount (\$) \$21.90	7	7 Payee address; City; State; Zip Code 1500 Hadley							
			Houston, TX 77002							
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Advertising Expense	edule)	(b)		, тх,	de of Texas. Complete Schedule T. officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght			Office held		
	Date		Payee name							
	07/19/2024		Uber							
	Amount (\$) \$67.90		Payee address; City; State; 1455 Market St	; Zip Co	de					
			San Francisco, CA 94103							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Travel Out of District	edule)	(b)		, тх,	de of Texas. Complete Schedule T. officeholder living expense 2]		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght			Office held		
	Date		Payee name							
	07/20/2024		Uber							
	Amount (\$) \$13.27		Payee address; City; State; 1455 Market St	Zip Co	de					
			San Francisco, CA 94103							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Travel Out of District	edule)	(b)		, тх,	de of Texas. Complete Schedule T. officeholder living expense nt		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Dffice sou	ght			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)					
	Sch: 26/40 Rpt: 39/53	Phillips, Fredericka M. (The Honorable)	00066411					
4	Date	5 Payee name						
	07/22/2024	Uber						
6	Amount (\$) \$14.07	Payee address; City; State; Zip Code 1455 Market St						
		San Francisco, CA 94103						
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description         Image: Control of Contro								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	07/21/2024	Uber						
	Amount (\$) \$25.16	Payee address; City; State; Zip Code 1455 Market St						
	DUDDOCE	San Francisco, CA 94103						
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	07/21/2024	Uber						
	Amount (\$) \$14.03	Payee address; City; State; Zip Code 1455 Market St						
		San Francisco, CA 94103						
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, 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		-				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: 27/40 Rpt: 40/53		Phillips, Fredericka M. (The Honorable)	)			00066411		
4	Date 07/21/2024		Payee name Uber						
6	Amount (\$) \$26.90		7 Payee address; City; State; Zip Code 1455 Market St San Francisco, CA 94103						
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel Out of District	edule)			ide of Texas. Complete Schedule T. , officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice sou	ght		Office held		
	Date		Payee name						
	07/21/2024		Uber						
	Amount (\$) \$25.51		Payee address; City; State; 1455 Market St	Zip Co	de				
			San Francisco, CA 94103						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel Out of District	edule)			ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	ffice sou	ght		Office held		
	Date		Payee name						
	07/22/2024		Uber						
	Amount (\$) \$15.56		Payee address; City; State; 1455 Market St	Zip Co	de				
			San Francisco, CA 94103						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel Out of District	edule)			ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name O	ffice sou	ght		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 Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	kpense /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: 28/40 Rpt: 41/53		Phillips, Fredericka M. (The Honorable)	)			00066411		
4	Date 07/22/2024		Payee name Uber						
6	Amount (\$) \$63.15		7 Payee address; City; State; Zip Code 1455 Market St San Francisco, CA 94103						
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel Out of District	edule)			de of Texas. Complete Schedule T. . officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	office sou	ght		Office held		
	Date		Payee name						
	08/03/2024		Uber						
	Amount (\$) \$46.14		Payee address; City; State; 1455 Market St	Zip Co	de				
			San Francisco, CA 94103						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel Out of District	edule)			de of Texas. Complete Schedule T. officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name O	office sou	ght		Office held		
	Date		Payee name						
	08/04/2024		Uber						
	Amount (\$) \$24.85		Payee address; City; State; 1455 Market St	Zip Co	de				
			San Francisco, CA 94103	i					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel Out of District	edule)			de of Texas. Complete Schedule T. officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	Office sou	ght		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 Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explains h	Office Ove 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	FILER NAME		-	3	Filer ID (Ethics Commission Filers)		
	Sch: 29/40 Rpt: 42/53		Phillips, Fredericka M. (The Honorable)	)			00066411		
4	Date	5	Payee name						
	08/04/2024		Uber						
6	Amount (\$) \$23.38	7	Payee address; City; State; Zip Code 1455 Market St						
			San Francisco, CA 94103						
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description 									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice sou	Jht		Office held		
	Date		Payee name						
	08/05/2024		Uber						
	Amount (\$) \$23.38		Payee address; City; State; 1455 Market St	Zip Co	le				
			San Francisco, CA 94103						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Travel Out of District	edule)			de of Texas. Complete Schedule T. officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O	office sou	ıht		Office held		
	Date		Payee name						
	07/19/2024		United Airlines						
	Amount (\$) \$40.00		Payee address; City; State; 233 S Wacker Dr Ste 430 Chicago, IL 60606	Zip Co	le				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Travel Out of District	edule)			de of Texas. Complete Schedule T. officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O	office sou	Jht		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       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				2	Filer ID (Ethics Commission Filers)	
1	Sch: 30/40 Rpt: 43/53	2	Phillips, Fredericka M. (The Honorable)	)			00066411	
4	Date	5	Payee name					
	07/22/2024		United Airlines					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de			
	\$80.00		233 S Wacker Dr					
			Ste 430					
			Chicago, IL 60606					
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	odulo)	(b) Description			
	OF	ľ	Fees	euulej		outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE				Check if Austir	n, TX,	officeholder living expense	
					airline fee			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name C	Office sou	Jht		Office held	
	Date		Payee name					
	07/29/2024		United Airlines					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
\$90.22 233 S Wacker Dr								
	++++++		Ste 430					
			Chicago, IL 60606					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Travel Out of District	edule)	(b) Description	outsi	de of Texas. Complete Schedule T.	
	EXPENDITORE					n, TX,	officeholder living expense	
					airline fee			
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	Jht		Office held	
	Date		Payee name					
	09/23/2024		United Airlines					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$871.73		233 S Wacker Dr					
			Ste 430					
			Chicago, IL 60606					
	DUDDOOF	(-)	-		(L) =			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description	outei	de of Texas. Complete Schedule T.	
	EXPENDITURE		Travel Out of District				officeholder living expense	
					flight for CLE			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	Jht		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 Fees Food/Beverage Expense Gift/Awards/Memorials Expense nittee Legal Services The Instruction Guide explain	Office Ove 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)			
-	Total pages Cabadula F1		· · · · · · · · · · · · · · · · · · ·	S HOW to COI	ipiete tills form.	-	Filer ID (Ethics Commission Filers)			
L.	Total pages Schedule F1: Sch: 31/40 Rpt: 44/53	I	Phillips, Fredericka M. (The Honorab	le)		3	Filer ID     (Ethics Commission Filers)       00066411			
4	Date	5	Payee name							
	09/18/2024		Jnknown, Andrii							
6	Amount (\$) \$100.00		Payee address; City; State; Zip Code unknown							
			Houston, TX 77002							
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this s Salaries/Wages/Contract Labor	chedule)		, тх,	de of Texas. Complete Schedule T. officeholder living expense DOM furniture			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office sou	ght		Office held			
	Date	I	Payee name							
	08/04/2024	(	Jrth Caffe							
	Amount (\$)	1	Payee address; City; Stat	e; Zip Co	de					
	\$17.74		159 S Hewitt							
			os Angeles, CA 90013							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this s Food/Beverage Expense	chedule)		, тх,	de of Texas. Complete Schedule T. . officeholder living expense Ξ			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	yht		Office held			
	Date		Payee name							
	08/16/2024		Valmart							
	Amount (\$) \$190.14		Payee address; City; Stat 9235 N Sam Houston Pkwy E	e; Zip Co	de					
			Humble, TX 77396							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this s Office Overhead/Rental Expense	chedule)		, тх,	de of Texas. Complete Schedule T. officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office sou	ght		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 Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide		Office Overl Polling Expe Printing Exp Salaries/Wa	ense ges/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 FI	LER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 32/40 Rpt: 45/53		nillips, Fredericka M. (The Ho	onorable	)			00066411		
4	Date 08/19/2024		Payee name Walmart							
6	Amount (\$)	<b>7</b> Pá	ayee address; City;	State:	; Zip Cod	e				
-	\$181.84	92	9235 N Sam Houston Pkwy E							
			umble, TX 77396							
8	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the to ffice Overhead/Rental Expen		ledule) (		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense DlieS		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		ndidate/Officeholder name	C	Office soug	ht		Office held		
	Date	Pa	ayee name							
	08/26/2024		almart							
	Amount (\$)	Pa	ayee address; City;	State:	; Zip Cod	e				
	\$57.55		235 N Sam Houston Pkwy E umble, TX 77396		•					
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the to ffice Overhead/Rental Expen		edule) (		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense ies		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ndidate/Officeholder name	C	Office soug	ht		Office held		
	Date	Pá	ayee name							
	09/12/2024		almart							
	Amount (\$)	Pa	ayee address; City;	State:	; Zip Cod	e				
	\$182.16		235 N Sam Houston Pkwy E	,	,p					
		H	umble, TX 77396		i					
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the to bod/Beverage Expense	p of this sch	edule) (	Check if Austin	n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense es and snacks		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ndidate/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	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:	-	<b>3</b> Filer ID (Ethics Commission Filers)					
-	Sch: 33/40 Rpt: 46/53	Phillips, Fredericka M. (The Honorable)	00066411					
4	Date 09/15/2024	Payee name Wayfair						
6	Amount (\$) \$129.89	Payee address; City; State; Zip Code 4 Copley Place Boston, MA 02116						
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense hiture					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	08/29/2024	Willie's G Seafood						
	Amount (\$) \$8.00	Payee address; City; State; Zip Code 1640 West Loop S Houston, TX 77027						
	PURPOSE OF EXPENDITURE	<ul> <li>a) Category (See Categories listed at the top of this schedule)</li> <li>Travel In District</li> <li>(b) Description</li> <li>Check if travel of Check if Austin,</li> </ul>	outside of Texas. Complete Schedule T. TX, officeholder living expense npaign dinner					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	08/29/2024	Willie's G Seafood						
	Amount (\$) \$44.64	Payee address; City; State; Zip Code 1640 West Loop S						
		Houston, TX 77027						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense ner meeting					
	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	/ - Il Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ove 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: 34/40 Rpt: 47/53		Phillips, Fredericka M. (The Honorable)	)			00066411	
4	Date	5	Payee name					
	07/18/2024		paypal					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le			
	\$7.72		2221 North First St					
			San Jose, CA 95131					
8	PURPOSE	(a)			(b) Decoription			
ľ	OF	(a)	Category (See Categories listed at the top of this sche Fees	edule)	(b) Description	outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE						, officeholder living expense	
					donation pro	ces	sing fee	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	)ffice sou	ıht		Office held	
	Date		Payee name					
	07/22/2024		paypal					
	Amount (\$)		Payee address; City; State;	Zip Co	le			
	\$72.74		2221 North First St	2.0 00				
	ψ12.14							
			San Jose, CA 95131					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Fees	edule)	Check if Austin	, тх	ide of Texas. Complete Schedule T. , officeholder living expense processing fee	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O	)ffice sou	Jht		Office held	
	Date		Payee name					
	08/02/2024		paypal					
	Amount (\$)		Payee address; City; State;	Zip Co	le			
	\$72.74		2221 North First St	2.6 00				
	$\varphi_1 z_{11} +$							
			San Jose, CA 95131					
	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 processing fee	
					Unine uundu		processing ree	
_		Ļ			- la 4			
Complete ONLY if direct         Candidate/Officeholder name         Office sought         Office held           expenditure to benefit C/OH         Office name         Office sought         Office held						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       Committee     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:	· · · · · · · · · · · · · · · · · · ·	Filer ID (Ethics Commission Filers)					
-	Sch: 35/40 Rpt: 48/53	Phillips, Fredericka M. (The Honorable)	00066411					
4	Date 08/04/2024	Payee name paypal						
6	Amount (\$)	' Payee address; City; State; Zip Code						
U	\$434.97	2221 North First St San Jose, CA 95131						
8	PURPOSE							
0	OF EXPENDITURE	Check if Austin, T.	tside of Texas. Complete Schedule T. X, officeholder living expense n processing fee					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	08/05/2024	paypal						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$144.99	2221 North First St San Jose, CA 95131						
	PURPOSE OF EXPENDITURE	Check if Austin, T.	tside of Texas. Complete Schedule T. X, officeholder living expense n processing fee					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	09/05/2024	paypal						
	Amount (\$) \$14.94	Payee address; City; State; Zip Code 2221 North First St						
		San Jose, CA 95131						
	PURPOSE OF EXPENDITURE	Check if Austin, T.	tside of Texas. Complete Schedule T. X, officeholder living expense n processing fee					
	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 Co 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			•	3	Filer ID (Ethics Commission Filers)			
-	Sch: 36/40 Rpt: 49/53		Phillips, Fredericka M. (The Honorable)	)			00066411			
4	Date 08/14/2024		Payee name paypal							
6	Amount (\$) \$29.39	7 Payee address; City; State; Zip Code								
8										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	Jht		Office held			
	Date		Payee name							
	08/20/2024		paypal							
	Amount (\$) \$87.68		Payee address; City; State; 2221 North First St San Jose, CA 95131	Zip Co	le					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Fees	edule)	Check if Austin	, тх,	de of Texas. Complete Schedule T. officeholder living expense processing fees			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	Iht		Office held			
	Date Payee name									
	08/27/2024		paypal							
	Amount (\$) \$22.17		Payee address; City; State; 2221 North First St	Zip Co	le					
			San Jose, CA 95131	r						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Fees	edule)	Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense processing fee			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	Jht		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/ Fees Office Overhead/F 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: 37/40 Rpt: 50/53		Phillips, Fredericka M. (The Honorable)	)			00066411		
4	Date	5	Payee name						
	08/29/2024		paypal						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le				
	\$22.66		2221 North First St						
		San Jose, CA 95131							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	odulo)	(b) Description				
-	OF		Fees	euule)		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE				Check if Austin	, TX	, officeholder living expense		
					online donati	on	processing fees		
9	Complete ONLY if direct     Candidate/Officeholder name     Office sought     Office held       expenditure to benefit C/OH     Office held     Office held								
	Date		Payee name						
	08/30/2024		paypal						
	Amount (\$) Payee address; City; State; Zip Code								
	\$144.99		2221 North First St						
	+=								
	San Jose, CA 95131								
PURPOSE       (a) Category       (See Categories listed at the top of this schedule)       (b) Description         OF       Fees       Check if travel outside of Texas. Complete Schedule T.         Check if Austin, TX, officeholder living expense									
							processing fee		
Complete ONLY if direct			Candidate/Officeholder name O	Office sought Office held					
expenditure to benefit C/OH									
	Date Payee name								
	09/03/2024		paypal						
	Amount (\$)		Payee address; City; State;	Zip Co	le				
\$43.84 2221 North First St									
	San Jose, CA 95131								
	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		
	online donation processing fee								
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	Jht		Office held		

EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politice Credit Card Payment			Event Expense Loan Repayment/ Fees Office Overhead/F Food/Beverage Expense Polling Expense - Gift/Awards/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:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 38/40 Rpt: 51/53		Phillips, Fredericka M. (The Honorable)	)			00066411		
4	Date	5	Payee name						
	09/04/2024		paypal						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le				
	\$29.39		2221 North First St						
			San Jose, CA 95131						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	odulo)	(b) Description				
	OF		Fees	cuuic)		outsi	de of Texas. Complete Schedule T.		
	EXPENDITURE				Check if Austin	, TX,	officeholder living expense		
					online donati	on	processing fee		
9	Complete ONLY if direct Candidate/Officeholder name Office sought Office held     expenditure to benefit C/OH								
	Date		Payee name						
	09/06/2024		paypal						
	Amount (\$) Payee address; City; State; Zip Code								
	\$29.39 2221 North First St								
	+=0.00								
	San Jose, CA 95131								
PURPOSE OF EXPENDITURE			<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Fees</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Check if Austin, TX, officeholder living expense</li> </ul>						
online donation processing fee							processing fee		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held							
	Date Payee name								
	09/10/2024		paypal						
	Amount (\$)		Payee address; City; State;	Zip Co	le				
	\$14.94 2221 North First St								
			San Jose, CA 95131						
	PURPOSE OF		Category (See Categories listed at the top of this sche Fees	edule)	(b) Description	outsi	de of Texas. Complete Schedule T.		
	EXPENDITURE						officeholder living expense processing fee		
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office soug H			ıht	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			Event Expense Loan Repayment/Reinbursemen Fees Office Overhead/Rental Expense Food/Beverage Expense Sift/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			•	3	Filer ID (Ethics Commission Filers)		
	Sch: 39/40 Rpt: 52/53	-	Phillips, Fredericka M. (The Honorable)	)			00066411		
4	Date	5	Payee name						
	09/11/2024		paypal						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de				
	\$7.72		2221 North First St						
			San Jose, CA 95131						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	dulo)	(b) Description				
	OF		Fees	uuic)		outsi	de of Texas. Complete Schedule T.		
	EXPENDITURE				Check if Austin	, TX,	officeholder living expense		
					online donati	on	processing fee		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	jht		Office held		
	Date		Payee name						
09/12/2024 paypal									
	Amount (\$) Payee address; City; State; Zip Code								
	\$29.39 2221 North First St								
	+_0.00								
	San Jose, CA 95131								
PURPOSE OF EXPENDITURE			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 processing fee						
Complete <u>ONLY</u> if direct expenditure to benefit C/O			Candidate/Officeholder name Office sought Office held H						
	Date Payee name								
	09/17/2024		paypal						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
\$29.39 2221 North First St									
			San Jose, CA 95131						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Fees	edule)	Check if Austin	, тх,	de of Texas. Complete Schedule T. officeholder living expense processing fee		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office soug			ht Office held				