

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 29

13 C / OH NAME Allen Barrow, Stacy **14** Filer ID (Ethics Commission Filers)
00087833

15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	10,684.97
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	4,714.38
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	19,751.17
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT

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

Stacy Allen Barrow

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - JC/OH

18 FILER NAME Allen Barrow, Stacy		19 Filer ID (Ethics Commission Filers) 00087833
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 10,684.97
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 4,714.38
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/21 Rpt: 4/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 09/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A, Bekalu	7 Amount of Contribution (\$) \$161.69
	6 Contributor address; City; State; Zip Code Alexandria, VA 22312	
8 Contributor's Principal Occupation IT analysts		9 Contributor's Job Title IT analysts
10 Contributor's employer/law firm NTT		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Adam	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Washington, DC 20018	
Contributor's Principal Occupation lawyer		Contributor's Job Title lawyer
Contributor's employer/law firm law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Janelle	Amount of Contribution (\$) \$19.00
	Contributor address; City; State; Zip Code Mobile, AL 36606	
Contributor's Principal Occupation Communications Manager		Contributor's Job Title Communications Manager
Contributor's employer/law firm Outokumpu		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/21 Rpt: 5/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 09/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrus, Gwen	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code Houston, TX 77088	
8 Contributor's Principal Occupation Teacher		9 Contributor's Job Title Teacher
10 Contributor's employer/law firm HISD		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrus, Gwen	Amount of Contribution (\$) \$48.70
	Contributor address; City; State; Zip Code Tomball, TX 77377	
Contributor's Principal Occupation Nurse practitioner		Contributor's Job Title Nurse practitioner
Contributor's employer/law firm Legacy community health		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrus, Gwen	Amount of Contribution (\$) \$48.70
	Contributor address; City; State; Zip Code Tomball, TX 77377	
Contributor's Principal Occupation NP		Contributor's Job Title NP
Contributor's employer/law firm Legacy community health		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/21 Rpt: 6/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 08/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arceneaux, Nan	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Houston, TX 77064	
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ash, Brandes	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Silver Spring, MD 20906	
Contributor's Principal Occupation Acting Chief Administrative Law Judge		Contributor's Job Title Acting Chief Administrative Law Judge
Contributor's employer/law firm DC Government		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrow, Doris	Amount of Contribution (\$) \$41.96
	Contributor address; City; State; Zip Code HOUSTON, TX 77022	
Contributor's Principal Occupation CAMPUS MINISTER		Contributor's Job Title CAMPUS MINISTER
Contributor's employer/law firm ARCHDIOCESE OF GALVESTON-HOUSTON		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/21 Rpt: 7/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 09/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrow, Doris <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77022	7 Amount of Contribution (\$) \$41.96
8 Contributor's Principal Occupation CAMPUS MINISTER		9 Contributor's Job Title CAMPUS MINISTER
10 Contributor's employer/law firm ARCHDIOCESE OF GALVESTON-HOUSTON		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boone, Christopher <hr/> Contributor address; City; State; Zip Code Las Vegas, NV 89135	Amount of Contribution (\$) \$48.70
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Boyd Gaming Corp		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyce, Monique <hr/> Contributor address; City; State; Zip Code WASHINGTON, DC 20003	Amount of Contribution (\$) \$51.02
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Google		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
(Empty space for additional information)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/21 Rpt: 8/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Maleaha	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Houston, TX 77003	
8 Contributor's Principal Occupation Law Professor		9 Contributor's Job Title Law Professor
10 Contributor's employer/law firm University of Houston		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryson, Shaprecia	Amount of Contribution (\$) \$48.70
	Contributor address; City; State; Zip Code Houston, TX 77004	
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm Oil and gas		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryson, Shaprecia	Amount of Contribution (\$) \$48.70
	Contributor address; City; State; Zip Code Houston, TX 77004	
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm Oil and gas		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/21 Rpt: 9/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 09/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryson, Shaprecia	7 Amount of Contribution (\$) \$48.70
	6 Contributor address; City; State; Zip Code Houston, TX 77004	
8 Contributor's Principal Occupation Lawyer		9 Contributor's Job Title Lawyer
10 Contributor's employer/law firm Oil and gas		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Brandon	Amount of Contribution (\$) \$19.00
	Contributor address; City; State; Zip Code Bridgeport, CT 06605	
Contributor's Principal Occupation Consultant		Contributor's Job Title Consultant
Contributor's employer/law firm Self employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Debra	Amount of Contribution (\$) \$48.70
	Contributor address; City; State; Zip Code Sacramento, CA 95820	
Contributor's Principal Occupation Assistant Secretary		Contributor's Job Title Assistant Secretary
Contributor's employer/law firm CalHHS		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/21 Rpt: 10/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Bertha	7 Amount of Contribution (\$) \$51.02
	6 Contributor address; City; State; Zip Code Houston, TX 77088	
8 Contributor's Principal Occupation unemployed		9 Contributor's Job Title unemployed
10 Contributor's employer/law firm unemployed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Danielle	Amount of Contribution (\$) \$48.70
	Contributor address; City; State; Zip Code Washington, DC 20001	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Labor union		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edetan, Etherial	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77003	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Clifford Chance		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/21 Rpt: 11/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Tanell	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Mount Vernon, NY 10550	
8 Contributor's Principal Occupation Lawyer		9 Contributor's Job Title Lawyer
10 Contributor's employer/law firm Tech		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Natasha	Amount of Contribution (\$) \$48.70
	Contributor address; City; State; Zip Code Washington, DC 20020	
Contributor's Principal Occupation HR		Contributor's Job Title HR
Contributor's employer/law firm Pg County Gov		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gantt, Aisha	Amount of Contribution (\$) \$487.00
	Contributor address; City; State; Zip Code Washington, DC 20018	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Na		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/21 Rpt: 12/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 08/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Jessica Aracely	7 Amount of Contribution (\$) \$48.70
	6 Contributor address; City; State; Zip Code Houston, TX 77057	
8 Contributor's Principal Occupation Lawyer		9 Contributor's Job Title Lawyer
10 Contributor's employer/law firm Holland & knight		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Shekkola	Amount of Contribution (\$) \$51.02
	Contributor address; City; State; Zip Code Houston, TX 77020	
Contributor's Principal Occupation Program Manager		Contributor's Job Title Program Manager
Contributor's employer/law firm ThermoFisher Scientific		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hazel, Shawn	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Greenbelt, MD 20770	
Contributor's Principal Occupation Architect		Contributor's Job Title Architect
Contributor's employer/law firm Department of Defense		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/21 Rpt: 13/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hearn, Jenna	7 Amount of Contribution (\$) \$48.70
	6 Contributor address; City; State; Zip Code Mableton, GA 30126	
8 Contributor's Principal Occupation PT		9 Contributor's Job Title PT
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Jeanne	Amount of Contribution (\$) \$10.90
	Contributor address; City; State; Zip Code Temple Hills, MD 20748	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Offices of JL Hughes		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Jermaine	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Washington, DC 20001	
Contributor's Principal Occupation Military		Contributor's Job Title Military
Contributor's employer/law firm USN		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 11/21 Rpt: 14/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 09/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Denesha <hr/> 6 Contributor address; City; State; Zip Code District Heights, MD 20747	7 Amount of Contribution (\$) \$156.48
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Public Servant		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Elijah <hr/> Contributor address; City; State; Zip Code Laurel, MD 20707	Amount of Contribution (\$) \$104.87
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm LSC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones III, Nelson M <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$5,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 12/21 Rpt: 15/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Mary	7 Amount of Contribution (\$) \$51.02
	6 Contributor address; City; State; Zip Code Pearland, TX 77584	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEDET, MARIE	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77029	
Contributor's Principal Occupation Technical Specialist		Contributor's Job Title Technical Specialist
Contributor's employer/law firm ENTERPRISE PRODUCTS INC.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacayo, Brittany	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Humble, TX 77396	
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm Harris County Public Defender's Office		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 13/21 Rpt: 16/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leday, Christie	7 Amount of Contribution (\$) \$20.09
	6 Contributor address; City; State; Zip Code Houston, TX 77008	
8 Contributor's Principal Occupation SLPA		9 Contributor's Job Title SLPA
10 Contributor's employer/law firm Team Approach therapy		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Taylor	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Highland Park, MI 48203	
Contributor's Principal Occupation Assistant Director of Equity		Contributor's Job Title Assistant Director of Equity
Contributor's employer/law firm Detroit Public Schools Community District		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Taylor	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Highland Park, MI 48203	
Contributor's Principal Occupation Assistant Director		Contributor's Job Title Assistant Director
Contributor's employer/law firm Detroit Public Schools		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 14/21 Rpt: 17/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 09/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockett, Elizabeth	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code Fresno, TX 77545	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Law Office of Elizabeth Lockett, PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCray, Robert	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Farmington, CT 06085	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm SAP America		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jen	Amount of Contribution (\$) \$48.70
	Contributor address; City; State; Zip Code Malvern, PA 19355	
Contributor's Principal Occupation Finance		Contributor's Job Title Finance
Contributor's employer/law firm Comcast		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 15/21 Rpt: 18/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minix, Brittany	7 Amount of Contribution (\$) \$19.00
	6 Contributor address; City; State; Zip Code Houston, TX 77040	
8 Contributor's Principal Occupation Community Manager		9 Contributor's Job Title Community Manager
10 Contributor's employer/law firm SBB Community Management		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Aurelia	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Hanover, MD 21076	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm AMZ		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moses, Joshua	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Vienna, VA 22182	
Contributor's Principal Occupation Owner		Contributor's Job Title Owner
Contributor's employer/law firm Sesom Consultants		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 16/21 Rpt: 19/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moses, Ruth <hr/> 6 Contributor address; City; State; Zip Code South Chesterfield, VA 23834	7 Amount of Contribution (\$) \$25.00
8 Contributor's Principal Occupation unemployed		9 Contributor's Job Title unemployed
10 Contributor's employer/law firm unemployed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moses, Tamika <hr/> Contributor address; City; State; Zip Code Raleigh, NC 27614	Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation Professor		Contributor's Job Title Professor
Contributor's employer/law firm NCCU School of Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peart, Audria <hr/> Contributor address; City; State; Zip Code Houston, TX 77088	Amount of Contribution (\$) \$150.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 17/21 Rpt: 20/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Natasha	7 Amount of Contribution (\$) \$48.70
	6 Contributor address; City; State; Zip Code Cypress, TX 77433	
8 Contributor's Principal Occupation Consultant		9 Contributor's Job Title Consultant
10 Contributor's employer/law firm Accenture		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plumbar-Holliman, Pamela	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77014	
Contributor's Principal Occupation unemployed		Contributor's Job Title unemployed
Contributor's employer/law firm unemployed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Morgan	Amount of Contribution (\$) \$19.00
	Contributor address; City; State; Zip Code Atlanta, GA 30310	
Contributor's Principal Occupation Nurse		Contributor's Job Title Nurse
Contributor's employer/law firm City of Hope		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 18/21 Rpt: 21/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saine, Kerra	7 Amount of Contribution (\$) \$51.02
	6 Contributor address; City; State; Zip Code Memphis, TN 38125	
8 Contributor's Principal Occupation Human Reaources		9 Contributor's Job Title Human Reaources
10 Contributor's employer/law firm Vantiva		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saine, Michael	Amount of Contribution (\$) \$51.02
	Contributor address; City; State; Zip Code Memphis, TN 38125	
Contributor's Principal Occupation Chief Deputy Court Clerk		Contributor's Job Title Chief Deputy Court Clerk
Contributor's employer/law firm City of Memphis		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulman, Kristin	Amount of Contribution (\$) \$19.21
	Contributor address; City; State; Zip Code Rockville, MD 20850	
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm DOJ		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 19/21 Rpt: 22/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singleton, Catasha	7 Amount of Contribution (\$) \$20.09
	6 Contributor address; City; State; Zip Code Houston, TX 77075	
8 Contributor's Principal Occupation Interior Designer		9 Contributor's Job Title Interior Designer
10 Contributor's employer/law firm Modchic Interiors		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, Nickolas	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77003	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Spencer		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Janelle	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Baltimore, MD 21239	
Contributor's Principal Occupation Contractor		Contributor's Job Title Contractor
Contributor's employer/law firm SAIC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 20/21 Rpt: 23/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Crystal	7 Amount of Contribution (\$) \$48.70
	6 Contributor address; City; State; Zip Code Houston, TX 77084	
8 Contributor's Principal Occupation Project Director		9 Contributor's Job Title Project Director
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washington, CJ	Amount of Contribution (\$) \$48.70
	Contributor address; City; State; Zip Code Houston, TX 77066	
Contributor's Principal Occupation unemployed		Contributor's Job Title unemployed
Contributor's employer/law firm unemployed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washington, Ella	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Spring, TX 77379	
Contributor's Principal Occupation unemployed		Contributor's Job Title unemployed
Contributor's employer/law firm unemployed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 21/21 Rpt: 24/29
2 FILER NAME Allen Barrow, Stacy		3 Filer ID (Ethics Commission Filers) 00087833
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Cody	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Houston, TX 77047	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Investment firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Cody	Amount of Contribution (\$) \$31.55
	Contributor address; City; State; Zip Code Houston, TX 77047	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Investment firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Ashley	Amount of Contribution (\$) \$31.55
	Contributor address; City; State; Zip Code Acworth, MI 30101	
Contributor's Principal Occupation Occupational therapist		Contributor's Job Title Occupational therapist
Contributor's employer/law firm Northside hospital		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/5 Rpt: 25/29	2 FILER NAME Allen Barrow, Stacy	3 Filer ID (Ethics Commission Filers) 00087833
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4 Date 09/06/2024	5 Payee name BELLISIMO ITALIAN RESTURANT
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6 Amount (\$) \$240.56	7 Payee address; City; State; Zip Code 902 E 33rd St Houston, TX 77022
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser Expenses
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/24/2024	Payee name DonorBox
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Amount (\$) \$183.87	Payee address; City; State; Zip Code 1520 Belle View Blvd #1406 Alexandria, VA 22307
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees for electronic contributions
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/23/2024	Payee name Houston Black American Democrats PAC
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Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 3837 PALM ST Houston, TX 77004
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Push Cards
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/5 Rpt: 26/29	2 FILER NAME Allen Barrow, Stacy	3 Filer ID (Ethics Commission Filers) 00087833
4 Date 09/03/2024	5 Payee name Houston LGBTQ+ Political Caucus	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO Box 66664 Houston, TX 77266	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship/advertisement
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/21/2024	Payee name Johnson, Natasha	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 725 E 41ST ST Houston, TX 77022	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting/Community Outreach
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/24/2024	Payee name Names.com Inc	
Amount (\$) \$95.51	Payee address; City; State; Zip Code 414 14th Street #200 Dallas, CO 80202	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense URL and Email Renewal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/5 Rpt: 27/29	2 FILER NAME Allen Barrow, Stacy	3 Filer ID (Ethics Commission Filers) 00087833
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4 Date 09/03/2024	5 Payee name Office Depot Inc
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6 Amount (\$) \$22.70	7 Payee address; City; State; Zip Code 6600 N Military Trl Boca Raton, FL 33487
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Display Aids
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/25/2024	Payee name Out of Office Productions
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Amount (\$) \$150.00	Payee address; City; State; Zip Code 11814 Lafferty Oaks Houston, TX 77013
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic Design
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/09/2024	Payee name PRINT N SIGN
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Amount (\$) \$59.53	Payee address; City; State; Zip Code 7350, HARWIN DR STE 316-A Houston, TX 77036
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printed Materials
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/5 Rpt: 28/29	2 FILER NAME Allen Barrow, Stacy	3 Filer ID (Ethics Commission Filers) 00087833
4 Date 09/13/2024	5 Payee name PayPal	
6 Amount (\$) \$6.13	7 Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees for electronic contributions
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/26/2024	Payee name Sticker Mule	
Amount (\$) \$43.20	Payee address; City; State; Zip Code 336 Forest Ave Amsterdam, NY 12010	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Buttons
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/24/2024	Payee name Stripe	
Amount (\$) \$317.88	Payee address; City; State; Zip Code 354 Oyster Point Blvd South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees for electronic contributions
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/5 Rpt: 29/29	2 FILER NAME Allen Barrow, Stacy	3 Filer ID (Ethics Commission Filers) 00087833	
4 Date 08/19/2024	5 Payee name Texas Democratic Women of Harris County Metro Area		
6 Amount (\$) \$95.00	7 Payee address; City; State; Zip Code P.O. Box 301411 Austin, TX 78703		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held