FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00084566 39 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Ms. Carvana NAME Date Received **ELECTRONICALLY FILED** 10/07/2024 NICKNAME LAST **SUFFIX** Cloud CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 850 West Little York Road MAILING Amount Receipt # **ADDRESS** Suite B Change of Address Houston, TX 77091 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Quinniece NAME NICKNAME LAST **SUFFIX** Chambers STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE: **TREASURER** 2311 Cezanne Cir **ADDRESS** (Residence or Business) Missouri City, TX 77459 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (832) 312-8508 **PHONE** REPORT TYPE 30th day before election Runoff 15th day after campaign treasurer January 15 X appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 07/01/2024 09/30/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/05/2024 X General Special

GO TO PAGE 2

12 OFFICE SOUGHT (if known)

District Judge District 488

11 OFFICE

OFFICE HELD (if any)

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 39

13 C / OH NAME	Cloud, Carvana (Ms.)		14 Filer ID (00084566	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without to I officeholders are required to report this information	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION	1 TOTAL LINITEM	ZED POLITICAL CONTRIBUTIONS(OTHER THAN	LDIEDCES LOANS	
TOTALS		ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$ 8,762.33
EXPENDITURE TOTALS	· · · · · · · · · · · · · · · · · · ·	ZED POLITICAL EXPENDITURES	\$ 0.00	
	4. TOTAL POLIT	CAL EXPENDITURES		\$ 15,104.01
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 4,828.85
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
		Ms.	Carvana Cloud	
		Signature of	Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL AB	DVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
of	, 20, to co	ertify which, witness my hand and seal of office.		
Signature of office	cer administering oath	Printed name of officer administering oath	Title of officer	administering oath

FORM JC/OH **SUBTOTALS - JC/OH COVER SHEET PG 3** 3 of 39 **18** FILER NAME 19 Filer ID (Ethics Commission Filers) 00084566 Cloud, Carvana (Ms.) **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) \$ 8,762.33 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) \$ 3. SCHEDULE E(J): LOANS (JUDICIAL) \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 15,104.01 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 1/18 Rpt: 4/39
2	FILER NAME Cloud, Carva	ana (Ms.)			1	Filer ID (Ethics Commission Filers) 00084566
4	Date 08/07/2024	5 Full name of contributor Aguayo, Carlos6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$100.00
		Humble, TX 77396				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	O Contributor's employer/law firm Aguayo Law PLLC 11 Law firm of contributor's spo			oouse	e (if any)	
12	! If contributor is	s a child, law firm of parent(s) (if	f any)			
	Date	Full name of contributor	——————————————————————————————————————	,	_	Amount of Contribution (\$)
	08/29/2024	Full name of contributor Bankett, Stephanie Contributor address; City;	out-of-state PAC (ID#:		<u> </u>	Amount of Contribution (\$) \$25.00
		Houston, TX 77069				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Real Estate	Agent		Real Estate Agent		
		employer/law firm		Law firm of contributor's sp	oouse	e (if any)
	-	gage & Realty Inc				
	If contributor is	s a child, law firm of parent(s) (i	fany)			
=	Date	Full name of contributor	out-of-state PAC (ID#:)	Ι.	Amount of Contribution (\$)
	07/13/2024	Below, Christina	_			\$50.00
		Contributor address; City; Rosenberg, TX 77469	State; Zip Code		•	
	Contributor's I	Principal Occupation		Contributor's Job Title		
		eceivable Manager		Accounts Receivable M	ana	ger
		employer/law firm		Law firm of contributor's sp		
	Red Bull	,				
	If contributor is	s a child, law firm of parent(s) (i	f any)	•		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 2/18 Rpt: 5/39
2	FILER NAME Cloud, Carva	ana (Ms.)			3	Filer ID (Ethics Commission Filers) 00084566
4	Date 09/06/2024	5 Full name of contributor Berg, Thomas6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$100.00
_		Houston, TX 77007		T		
8		Principal Occupation		9 Contributor's Job Title		
<u> </u>	Lawyer			Lawyer		<i>(1)</i>
10	Self	employer/law firm		11 Law firm of contributor's sp	oous	se (If any)
12	If contributor is	s a child, law firm of parent(s) (if	any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/16/2024	Broadnax, Desiree Contributor address; City;	State; Zip Code			\$25.00
	0	Houston, TX 77049		Occasilla de de Tida		
		Principal Occupation		Contributor's Job Title		
_	Manager	and a coull according		Manager		and (if any)
	HCDA	employer/law firm		Law firm of contributor's sp	Jou:	se (II dily)
	If contributor is	s a child, law firm of parent(s) (if	any)	•		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	07/01/2024	Brown, Amos		,		\$100.00
		Contributor address; City; Houston, TX 77090	State; Zip Code		•	
	Contributor's I	rincipal Occupation		Contributor's Job Title	_	
	Sales			Sales		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Company					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 3/18 Rpt: 6/39
2	FILER NAME Cloud, Carva				3 Filer ID (Ethics Commission Filers) 00084566
4	Date 08/18/2024	 5 Full name of contributor Brown, Errol 6 Contributor address; City; States Pearland, TX 77584 	out-of-state PAC (ID#:_		7 Amount of Contribution (\$) \$47.00
8	Contributor's I	I Principal Occupation		9 Contributor's Job Title	
	N/A			N/A	
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	ouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if a	ny)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	08/12/2024	Budwine, Kirsten Contributor address; City; Sta Manvel, TX 77578			\$25.00
	Contributor's I	Principal Occupation		Contributor's Job Title	
	Lawyer	incipal occupation		Lawyer	
		employer/law firm		Law firm of contributor's sp	ouse (if any)
	If contributor is	s a child, law firm of parent(s) (if a	ny)	<u> </u>	
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	09/23/2024	Cloud, Carvana Contributor address; City; Sta Houston, TX 77091	ate; Zip Code		\$2,550.00
	Contributor's F	Principal Occupation		Contributor's Job Title	
	Attorney			Attorney	
	Contributor's 6	employer/law firm		Law firm of contributor's sp	ouse (if any)
	If contributor is	s a child, law firm of parent(s) (if a	ny)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 4/18 Rpt: 7/39
2	FILER NAME Cloud, Carva	ana (Ms.)			3	Filer ID (Ethics Commission Filers) 00084566
4	Date 09/26/2024	5 Full name of contributor Cloud, Carvana6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$400.00
		Houston, TX 77091				
8		Principal Occupation		9 Contributor's Job Title		
_	Attorney			Attorney		
10	Self	employer/law firm		11 Law firm of contributor's sp	oous	se (If any)
12	If contributor is	s a child, law firm of parent(s) (if	any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/27/2024	Cloud, Carvana Contributor address; City;	State; Zip Code			\$250.00
	0	Houston, TX 77091		I 0		
	Attorney	Principal Occupation		Contributor's Job Title Attorney		
		employer/law firm		Law firm of contributor's sp	2011	co (if amy)
	Self	sinployernaw iiini		Law IIIII of Continution 3 Sp	Jou.	se (II arry)
	If contributor is	s a child, law firm of parent(s) (if	any)	1		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	08/30/2024	Cloud, Carvana				\$700.00
		Contributor address; City; Houston, TX 77091	State; Zip Code		•	
	Contributor's F	rincipal Occupation		Contributor's Job Title	_	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Self					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 5/18 Rpt: 8/39
2	FILER NAME Cloud, Carva	ana (Ms.)			3	Filer ID (Ethics Commission Filers) 00084566
4	Date 08/28/2024	5 Full name of contributor Cloud, Carvana6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$53.27
		Houston, TX 77091				
8		Principal Occupation		9 Contributor's Job Title		
_	Attorney					
10	Self	employer/law firm		11 Law firm of contributor's sp	oous	se (If any)
12	If contributor is	s a child, law firm of parent(s) (if	any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	08/19/2024	Clouston, Rosemarie Contributor address; City;	State; Zip Code			\$25.00
		Wilmington, DE 19801				
		Principal Occupation		Contributor's Job Title		
	Consultant			Consultant		or (if you)
	Self	employer/law firm		Law firm of contributor's sp	ou	se (II any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	07/09/2024	Daughtry, Deavra	_			\$213.05
		Contributor address; City; Significant Contributor Contributor address; City; Significant Contributor	State; Zip Code			
	Contributor's F	rincipal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Self					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains hov	v to complete this 1	form.	1	Total pages Schedule A(J)1: Sch: 6/18 Rpt: 9/39
2	FILER NAME Cloud, Carva	ana (Ms.)			3	Filer ID (Ethics Commission Filers) 00084566
4	Date 08/18/2024	5 Full name of contributor Dixon, Carlondria6 Contributor address; City; S	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$50.00
		Spring, TX 77382				
8		Principal Occupation		9 Contributor's Job Title		
	Mortgage In:			Mortgage Inspector		
10	Contributor's 6 Self	employer/law firm		11 Law firm of contributor's sp	oou	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if	any)	L		
H	Date	Full name of contributor	out-of-state PAC (ID#:	1	Т	Amount of Contribution (\$)
	08/18/2024	Dixon, Tonya Contributor address; City; S	<u> </u>			\$47.00
		Houston, TX 77044				
		Principal Occupation		Contributor's Job Title		
		mpact Director		Community Impact Dire	cto	r
		employer/law firm		Law firm of contributor's sp	oou	se (if any)
		nity Of Faith Church				
	If contributor is	s a child, law firm of parent(s) (if	any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	07/03/2024	Dutton:Williams, Virginia		,	l	\$25.00
		Contributor address; City; S Houston, TX 77092	itate; Zip Code		•	
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Retired			Retired		
	Contributor's	employer/law firm		Law firm of contributor's sp	oou	se (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 7/18 Rpt: 10/39
2	FILER NAME Cloud, Carva	ana (Ms.)			3	Filer ID (Ethics Commission Filers) 00084566
4	Date 07/03/2024	5 Full name of contributor Eakin, Elizabeth6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$100.00
Ļ	Caratuila utaula I	Houston, TX 77092		O Contributorio Joh Titlo		
8		Principal Occupation		9 Contributor's Job Title		
10	Attorney	and a sault assisting		Attorney		
10	Harris Count	employer/law firm		11 Law firm of contributor's sp	Jous	e (II any)
42			5 a.m.)			
12	in Contributor is	s a child, law firm of parent(s) (i	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/26/2024	Falender, Allie Contributor address; City;	State; Zip Code			\$25.00
		Houston, TX 77005				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Retired			Retired		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
		s a child, law firm of parent(s) (i	f anv)			
	ii contributor i	s a clina, law iiiii oi paichi(s) (i	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	08/18/2024	Frizell, Elizabeth				\$50.00
		Contributor address; City; Dallas, TX 75203	State; Zip Code			
-	Contributor's F	I Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Burt Barr & A					, ,,
	If contributor is	s a child, law firm of parent(s) (i	f any)	1		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 8/18 Rpt: 11/39
2	FILER NAME Cloud, Carva	ana (Ms.)			3	Filer ID (Ethics Commission Filers) 00084566
4	Date 08/18/2024	5 Full name of contributor GOOCH, LORI 6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$47.00
		HUMBLE, TX 77346				
8		Principal Occupation		9 Contributor's Job Title		
_	Attorney			Attorney		
10	O Contributor's employer/law firm Harris county 11 Law firm of contributor's spo			oous	e (If any)	
12		y s a child, law firm of parent(s) (i	family			
12	i Continuator i	s a cilliu, iaw iiiiii oi pareiii(s) (i	iany)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)
	07/03/2024	Genet, Peggy Contributor address; City;	State; Zip Code			\$200.00
		Houston, TX 77083				
	Contributor's F	Principal Occupation		Contributor's Job Title	•	
	Retired			Retired		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)	l		
H	Date	Full name of contributor	out-of-state PAC (ID#:	,	Т	Amount of Contribution (\$)
	08/18/2024	Gordy, Walt	U out-of-state i AC (ID#.)		\$50.00
		Contributor address; City; Houston, TX 77047	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Analyst			Analyst		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Phillips 66					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 9/18 Rpt: 12/39
2	FILER NAME Cloud, Carva	ana (Ms.)			3	Filer ID (Ethics Commission Filers) 00084566
4	Date 08/31/2024	5 Full name of contributor Grant, Allena6 Contributor address; City;Stafford, TX 77477	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$100.00
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
ľ	Program Co			Program Coordinator		
10				11 Law firm of contributor's sp	20110	o (if any)
10	Contributor's employer/law firm BridgeYear 11 Law firm of contributor's spo			Jous	e (ii aiiy)	
12	! If contributor is	s a child, law firm of parent(s) (i	f any)	•		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	08/19/2024	Grant, Kenneth Contributor address; City;	<u> </u>			\$50.00
		Stafford, TX 77477				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Sales			Sales		
	Contributor's of MESG Grou	employer/law firm n		Law firm of contributor's sp	oous	e (if any)
		s a child, law firm of parent(s) (i	f any)			
	ii contributor i	s a clina, law iiiii oi paichi(s) (i	i arry)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	08/24/2024	Grant, Kenneth	_			\$50.00
		Contributor address; City; Stafford, TX 77477	State; Zip Code			
\vdash	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Sales			Sales		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Mesg Group					
	If contributor is	s a child, law firm of parent(s) (i	f any)	•		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 10/18 Rpt: 13/39
2	FILER NAME Cloud, Carva	ana (Ms.)			3	Filer ID (Ethics Commission Filers) 00084566
4	Date 08/12/2024	5 Full name of contributor Griffin, Kathryn 6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$100.00
		Houston, TX 77004				
8		Principal Occupation		9 Contributor's Job Title		
	Ht Director			Ht Director		
10		employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
_		y constable Prect 1				
12	If contributor is	s a child, law firm of parent(s) (i	rany)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	08/30/2024	HERRON, DELISE Contributor address; City;	State; Zip Code			\$50.00
		Houston, TX 77088				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	RETIRED			RETIRED		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
		SON CANCER HOSPITAL				
	If contributor is	s a child, law firm of parent(s) (i	fany)			
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	07/05/2024	Hamilton, Nicole				\$100.00
		Contributor address; City;	·			
		Missouri City, TX 77459		1		
		Principal Occupation		Contributor's Job Title		
	Real estate			Real estate developer		(the same)
	Self	employer/law firm		Law firm of contributor's sp	Jous	se (II any)
-		s a child, law firm of parent(s) (if	f any)			

	MONET	ARY POLITICAL CON	ITRIBUTIC	ONS	SCHEDULE A	J)1
	The Instru	ction Guide explains how to c	omplete this f	orm.	1 Total pages Schedule A(J)1: Sch: 11/18 Rpt: 14/39	
2	FILER NAME Cloud, Carva				3 Filer ID (Ethics Commission Fi 00084566	lers)
4	Date 09/22/2024	 Full name of contributor or Hicks, Craig Contributor address; City; State; Z Spring, TX 77379 	ut-of-state PAC (ID#:_ ip Code		7 Amount of Contribution (\$)	3250.00
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Finance			Finance		
10	Contributor's employer/law firm Excelerate Energy		11 Law firm of contributor's sp	pouse (if any)		
12	If contributor i	s a child, law firm of parent(s) (if any)		L		
	Date	Full name of contributor	ut-of-state PAC (ID#:_)	Amount of Contribution (\$)	
	08/19/2024	Hutchison, DeAndre' Contributor address; City; State; Z Houston, TX 77012				\$50.00
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Public safety			Public safety		
	Contributor's of City of Hous	employer/law firm		Law firm of contributor's sp	pouse (if any)	
		s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor on	ut-of-state PAC (ID#:_)	Amount of Contribution (\$)	
	07/02/2024	Irvin, Laverne Contributor address; City; State; Z Houston, TX 77088	ip Code			\$50.00
	Contributor's I	Principal Occupation		Contributor's Job Title	•	
	Retired			Retired		
	Contributor's e	employer/law firm		Law firm of contributor's sp	pouse (if any)	
	If contributor i	s 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: 12/18 Rpt: 15/39			
2	FILER NAME Cloud, Carva				3	Filer ID (Ethics Commission Filers) 00084566		
4	Date 08/18/2024	 5 Full name of contributor out-of-state PAC Jefferson, Tiffany 6 Contributor address; City; State; Zip Code Houston, TX 77091 	C (ID#:_)	7	Amount of Contribution (\$) \$100.00		
8	Contributor's I	I Principal Occupation		9 Contributor's Job Title	_			
	Law enforce			Law enforcement				
10		employer/law firm ton Houston Police Dept		11 Law firm of contributor's sp	ous	se (if any)		
12	If contributor is	s a child, law firm of parent(s) (if any)		<u> </u>				
	Date	Full name of contributor Out-of-state PAC	: (ID#:)		Amount of Contribution (\$)		
	Date Full name of contributor out-of-state PAC (ID#:) 08/26/2024 Jones, Barbara Contributor address; City; State; Zip Code Houston, TX 77080					\$100.00		
	Contributor's F	l Principal Occupation		Contributor's Job Title				
	Owner			Owner				
	Contributor's e	employer/law firm		Law firm of contributor's sp	ous	se (if any)		
	BiLiteracy S	olutions		·				
	If contributor is	s a child, law firm of parent(s) (if any)						
	Date	Full name of contributor out-of-state PAC	C (ID#:_			Amount of Contribution (\$)		
	09/16/2024 Joseph, Kina Contributor address; City; State; Zip Code Pasadena, TX 77504				\$10.00			
	Contributor's I	Principal Occupation		Contributor's Job Title	•			
	Medical Rec	cords Tech		Medical Records Tech				
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)		
	Dept.of Vete	erans Affairs						
	If contributor is	s a child, law firm of parent(s) (if any)						

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 13/18 Rpt: 16/39
2	FILER NAME Cloud, Carva	ana (Ms.)			3	Filer ID (Ethics Commission Filers) 00084566
4	Date 08/26/2024	Full name of contributor		7	Amount of Contribution (\$) \$100.00	
		Houston, TX 77020				
8		Principal Occupation		9 Contributor's Job Title		
	Retired			Retired		
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	08/12/2024 Knight Wright, Mia Contributor address; City; State; Zip Code					\$100.00
		Missouri City, TX 77459				
		Principal Occupation		Contributor's Job Title		
	Director			Director		
		employer/law firm Dak Baptist Church		Law firm of contributor's sp	oous	se (if any)
		s a child, law firm of parent(s) (if	(any)			
	ii contributor i	s a ciliu, iaw iiiii oi pareiii(s) (ii	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	08/19/2024	Lackey, Holt				\$100.00
	Contributor address; City; State; Zip Code Austin, TX 78753					
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Holt Major L	ackey, PLLC				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A(J)1: Sch: 14/18 Rpt: 17/39
2	FILER NAME Cloud, Carva	ana (Ms.)			3	Filer ID (Ethics Commission Filers) 00084566
4	Date 08/19/2024			7	Amount of Contribution (\$) \$50.00	
		Porter, TX 77365				
8		Principal Occupation		9 Contributor's Job Title		
	Teacher			Teacher		
10	Contributor's 6 HISD	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	08/16/2024 Manuel, Carla Contributor address; City; State; Zip Code					\$50.00
		New Caney, TX 77357				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Analyst			Analyst		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
=	Date	Full name of contributor	out-of-state PAC (ID#:)	Т	Amount of Contribution (\$)
	08/18/2024	McGaskey, Jessica	out of state 1740 (IBM.			\$47.00
	Contributor address; City; State; Zip Code Houston, TX 77028					
	Contributor's F	I		Contributor's Job Title	<u> </u>	
	Bartender			Bartender		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Cyclone					
	If contributor is	s a child, law firm of parent(s) (i	f any)	1		

	MONET	ARY POLITICAL (SCHEDULE A(J)1					
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 15/18 Rpt: 18/39			
2	FILER NAME Cloud, Carva				3 Filer ID (Ethics Commission Filers) 00084566			
4	Date 08/20/2024	1 - 1		7 Amount of Contribution (\$) \$25.00				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title				
	Business An	alyst		Business Analyst				
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	pouse (if any)			
12	If contributor is	s a child, law firm of parent(s) (if a	any)					
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)			
	07/02/2024 Potter, Jacqueline Contributor address; City; State; Zip Code				\$250.00 			
	Contributor's I	Humble, TX 77346 Principal Occupation		Contributor's Job Title				
	Retired	тпора Оссираноп		Retired				
		employer/law firm		Law firm of contributor's spouse (if any)				
		ton Police Dept			F(,)			
		s a child, law firm of parent(s) (if a	any)					
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)			
	09/10/2024 Randall, Allison Contributor address; City; State; Zip Code Washington, DC 20009			\$100.00 				
	Contributor's I	Principal Occupation		Contributor's Job Title				
	Public Policy	1		Public Policy				
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)			
	Federal Gov	rernment						
	If contributor is	s a child, law firm of parent(s) (if a	any)					

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A(J)1: Sch: 16/18 Rpt: 19/39
2	FILER NAME Cloud, Carva	ana (Ms.)			3	Filer ID (Ethics Commission Filers) 00084566
4	Date 07/03/2024			7	Amount of Contribution (\$) \$100.00	
		Houston, TX 77021				
8		Principal Occupation		9 Contributor's Job Title		
	Developmen			Development		
10		employer/law firm		11 Law firm of contributor's sp	ous	se (if any)
L	Invictus	1111 6 6 7				
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 (\$)
	08/18/2024 Shepard, E Kay Contributor address; City; State; Zip Code				\$47.00	
		Houston, TX 77019		1		
		Principal Occupation		Contributor's Job Title		
	Retired			Retired		
	Na	employer/law firm		Law firm of contributor's sp	ous	se (If any)
		s a child, law firm of parent(s) (if	anyl			
	ii contributor i	s a ciliu, iaw iiiiii oi paieiii(3) (ii	arry)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	07/03/2024	Shepard, Eulundia Kay				\$101.01
	Contributor address; City; State; Zip Code Houston, TX 77019					
_	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Retired			Retired		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Na					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A(J)1: Sch: 17/18 Rpt: 20/39
2	FILER NAME Cloud, Carva				3	Filer ID (Ethics Commission Filers) 00084566
4	Date 09/25/2024	5 Full name of contributor out-of-state PAC (ID#:) Sinclair, Natasha 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$200.00	
		Bellaire, TX 77401				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Contributor's e Retired	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)
	08/30/2024					\$500.00
		Houston, TX 77002				
	Contributor's Principal Occupation Contributor's Job Title					
	Attorney			Attorney		
		employer/law firm 		Law firm of contributor's sp	oous	se (if any)
	Slider Law F					
	If contributor is	s a child, law firm of parent(s) (i	fany)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	07/31/2024	Stinson, Rachel	_			\$100.00
	Contributor address; City; State; Zip Code Houston, TX 77055					
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Wright Close	e Barger				
	If contributor is	s a child, law firm of parent(s) (if	fany)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1	
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 18/18 Rpt: 21/39	
2	FILER NAME Cloud, Carva	ana (Ms.)			1	Filer ID (Ethics Commission Filers) 00084566	
4	Date 08/12/2024	5 Full name of contributor Terrell, Leticia6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$25.00	
		Houston, TX 77014					
8		Principal Occupation		9 Contributor's Job Title			
		elecommunicator		Sr. Police Telecommun	icato	or	
10	Contributor's 6 City of Hous	employer/law firm ton		11 Law firm of contributor's sp	ous	e (if any)	
12	! If contributor is	s a child, law firm of parent(s) (if	any)	1			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/18/2024	8/18/2024 Wilson, Nichole Contributor address; City; State; Zip Code				\$500.00	
	Contributor's I	Indianapolis, IN 46278		Contributor's Job Title			
Contributor's Principal Occupation Contributor's Job Title Healthcare Admin Healthcare Admin							
		employer/law firm		Law firm of contributor's spouse (if any)			
		s a child, law firm of parent(s) (if	any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/10/2024 ray, jon r Contributor address; City; State; Zip Code Houston, TX 77002				\$100.00		
	Contributor's I	rincipal Occupation		Contributor's Job Title	<u> </u>		
	retired			retired			
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	e (if any)	
	HCSO						
	If contributor is	s a child, law firm of parent(s) (if	any)				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/18 Rpt: 22/39	Cloud, Carvana (Ms.) 00084566
4	Date	5 Payee name
	09/03/2024	ABC Canvassing
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,710.00	3901 Emancipation Ave
		Houston, TX 77004
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Canvassing
		Curivassing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
	09/30/2024	ABC Canvassing
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	3901 Emancipation Ave
		Houston, TX 77004
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Canvassing
		Canvaconig
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date	Payee name
	09/30/2024	ABC Canvassing
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	3901 Emancipation Ave
		Houston, TX 77004
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Conversing
		Canvassing
_	Complete ONLY if direct	Candidate/Officeholder name Office acusts
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributing Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/18 Rpt: 23/39	Cloud, Carvana (Ms.) 00084566
4	Date	5 Payee name
	09/05/2024	Bay Area Democrats
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$150.00	1215 Bay Area Blvd
		Houston, TX 77058
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Donations
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/O	
	Date	Payee name
	09/03/2024	Boost Mobile
	Amount (\$)	Payee address; City; State; Zip Code
	\$143.59	3834 Aldine Mail Route
		Houston, TX 77039
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Phone
		Campaign Thoric
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	Para area
	Date 07/29/2024	Payee name Campaign Partner
	Amount (\$)	Payee address; City; State; Zip Code
	\$29.00	PO Box 118
		Still River, MS 01467
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Website Fee
		vvensile ree
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	
_		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

	Credit Card Payment	The Instruction Guide explains how to com	nple	te this form.
1	Total pages Schedule F1: Sch: 3/18 Rpt: 24/39	2 FILER NAME Cloud, Carvana (Ms.)		3 Filer ID (Ethics Commission Filers) 00084566
4	Date 08/28/2024	5 Payee name Campaign Partner		
6	Amount (\$) \$29.00	7 Payee address; City; State; Zip Cod PO Box 118	le	
8	PURPOSE OF EXPENDITURE	Still River, MS 01467 (a) Category (See Categories listed at the top of this schedule) Advertising Expense		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website Fee
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht	Office held
	Date 09/26/2024	Payee name Campaign Partner		
	Amount (\$) \$42.00	Payee address; City; State; Zip Cod PO Box 118	le	
	PURPOSE OF EXPENDITURE	Still River, MS 01467 (a) Category (See Categories listed at the top of this schedule) Advertising Expense		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website Fee
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office soug	ht	Office held
	Date 09/30/2024	Payee name Campaign Partner		
	Amount (\$) \$29.00	Payee address; City; State; Zip Cod PO Box 118	le	
		Still River, MS 01467		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website Fee
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office soug	ht	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1	Sch: 4/18 Rpt: 25/39	2 FILER NAME Cloud, Carvana (Ms.) 3 Filer ID (Ethics Commission Filers) 00084566
4	Date	5 Payee name
	07/01/2024	Cloud, Carvana
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$8.66	850 WEST LITTLEYORK RD
		Suite B
		Houston, TX 77091
_	DUDDOOF	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Loan Repayment
		Louit Repayment
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
H	Date	Payee name
	07/01/2024	Cloud, Carvana
	Amount (\$)	Payee address; City; State; Zip Code
	\$121.76	850 WEST LITTLEYORK RD
		Suite B
		Houston, TX 77091
	PURPOSE	- In.
	OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Loan Repayment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	07/08/2024	Cloud, Carvana
<u> </u>	Amount (\$)	Payee address; City; State; Zip Code
	\$82.18	850 WEST LITTLEYORK RD
	Ψ02.10	
		Suite B
		Houston, TX 77091
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Loan Repayment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
_	Total manus Oct 11 51		
1	Total pages Schedule F1: Sch: 5/18 Rpt: 26/39	2 FILER NAME Cloud, Carvana (Ms.) 3 Filer ID (Ethics Commission Filers) 00084566	
Ļ		l l	_
4	Date	5 Payee name	
L	07/22/2024	Cloud, Carvana	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$45.00	850 WEST LITTLEYORK RD	
		Suite B	
		Houston, TX 77091	
8	PURPOSE		
١	OF		
	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Loan Repayment	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
H	Date	Payee name	_
	07/23/2024	Cloud, Carvana	
<u> </u>			_
	Amount (\$)		
	\$170.00	850 WEST LITTLEYORK RD	
		Suite B	
		Houston, TX 77091	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Loan Repayment/Reimbursement	
	ZA ZADITORZ	Check if Austin, TX, officeholder living expense	
		Loan Repayment	
_			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
L	,		_
	Date	Payee name	
L	08/26/2024	Cloud, Carvana	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$175.00	850 WEST LITTLEYORK RD	
		Suite B	
		Houston, TX 77091	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Loan Repayment/Reimbursement Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Loan Repayment	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	Н	
			_

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

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 6/18 Rpt: 27/39	Cloud, Carvana (Ms.)	00084566
4	Date	5 Payee name	
	08/29/2024	Cloud, Carvana	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$40.00	850 WEST LITTLEYORK RD	
		Suite B	
		Houston, TX 77091	
8	PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	Description
	EXPENDITURE	Loan Repayment/Reimbursement	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Loan Repayment
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	4	
	Date	Payee name	
	09/12/2024	Cloud, Carvana	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.00	850 WEST LITTLEYORK RD	
		Suite B	
		Houston, TX 77091	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Loan Repayment/Reimbursement	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Loan Repayment
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	-1	
	Date	Payee name	
	09/13/2024	Cloud, Carvana	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$62.84	850 WEST LITTLEYORK RD	
		Suite B	
		Houston, TX 77091	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Loan Repayment/Reimbursement	Check if travel outside of Texas. Complete Schedule T.
	EX. ENDITORE		Check if Austin, TX, officeholder living expense
			Loan Repayment
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Ol		Cinco ficia

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

Candidate/Officel Credit Card Paymen		l Committee	Legal Services The Instruction Guid			s/Contract Lab ete this for		OTHER (enter a	category not listed above)
1 Total pages Scho	edule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)
Sch: 7/18 Rpt:	28/39	Cloud, Carv	ana (Ms.)					00084566	
4 Date		5 Payee name							
09/13/2024		Cloud, Carv	ana						
6 Amount (\$)		7 Payee addres	ss; City;	State; Zi	Code				
\$	\$100.00	850 WEST I	LITTLEYORK RD						
		Suite B							
		Houston, T〉	77091						
8 PURPOSE		(a) Category (Se	e Categories listed at the	top of this schedule	(b)	Description	on		
OF EXPENDITURE	=		ment/Reimburser			=		de of Texas. Com	
EXI ENDITORE	-					\Box		officeholder living	g expense
						Loan Re	epaymer	Ι	
O Complete ONLY	if alive at	Condidate/Offi		Office				Office he	
9 Complete ONLY expenditure to be		Candidate/Office	Lenoider name	Опісе	sought			Office he	eiu
Date		Payee name							
07/22/2024		Culture Mea	CUITAC						
				04-4 70	. 0-1-				
Amount (\$)	050.00	Payee addres		State; Zi _l	Code				
\$1 	.,250.00	1601 Indust	riai Bivo						
		Sugarland, ⁻	TX 77478						
PURPOSE OF		(a) Category (Se	e Categories listed at the	top of this schedule	(b)	Description			
EXPENDITURE	E	Salaries/Wa	ges/Contract Lab	or		=		de of Texas. Com	
						Consulti		officeholder living	g expense
						Consum	ing r cco	,	
Complete ONLY	if direct	Candidate/Offic	ceholder name	Office	sought			Office he	eld
expenditure to be					3				
Date		Payee name							
08/26/2024		Culture Mea	sures						
Amount (\$)		Payee addres	ss; City;	State; Zi	Code				
	,250.00	1601 Indust	•						
Ψ.	,								
		Sugarland, ⁻	ΓX 77478						
PURPOSE		(a) Category 194	e Categories listed at the	ton of this schedule	(b)	Description	on		
OF EVDENDITUDE	<u>-</u>	l	ges/Contract Lab					de of Texas. Com	plete Schedule T.
EXPENDITURE	=							officeholder living	g expense
						Consulti	ing Fees	;	
Complete ONLY expenditure to be		Candidate/Office	ceholder name	Office	sought			Office he	eld
5.p5aitai 6 10 10		· ·							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/18 Rpt: 29/39	Cloud, Carvana (Ms.) 00084566
4	Date	5 Payee name
	09/10/2024	Cyclone Anaya's Tex-Mex Kitchen
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$75.08	309 Gray St STE 111
		Houston, TX 77002
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meals
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	Н
	Date	Payee name
	07/03/2024	Goode Company
	Amount (\$)	Payee address; City; State; Zip Code
	\$45.41	5109 Kirby Dr
		Houston, TX 77098
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meals
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	н
	Date	Payee name
	09/26/2024	Houston Black Democrats
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	5300 Griggs Rd
	, ,	337 1
		Houston, TX 77021
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXI ENDITORE	Candidate/Officeholder/Political Committee
		Donations
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/18 Rpt: 30/39	Cloud, Carvana (Ms.) 00084566
4	Date	5 Payee name
	07/15/2024	Intuit Mailchimp
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$63.96	675 Ponce de Leon Ave NE
		Suite 5000
		Atlanta, GA 30308
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Marketing Platform
		Warketing Flationii
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	08/14/2024	Intuit Mailchimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$63.96	675 Ponce de Leon Ave NE
		Suite 5000
		Atlanta, GA 30308
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Marketing Platform
		Walketing Flatform
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/16/2024	Intuit Mailchimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$63.96	675 Ponce de Leon Ave NE
		Suite 5000
		Atlanta, GA 30308
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	2/11 2/13/13/12	Check if Austin, TX, officeholder living expense
		Marketing Platform
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
T		
1		

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 Exper Gift/Awards/Memorials Legal Services	s Expense	Office Over Polling Exp Printing Exp Salaries/Wa	pense ages/Contract Labor		Travel in District Travel Out of Dis	Equipment & Related Expense	
_		_		The Instruction G	ulue explains i	now to con	iipiete tilis ioriii.	_		
1	Total pages Schedule F1: Sch: 10/18 Rpt: 31/39	2	FILER NAME Cloud, Carv					3	Filer ID 00084566	(Ethics Commission Filers)
1	Date	5	Payee name	. ,				<u> </u>		
7	07/30/2024	٦	Lyft							
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Cod	de			
	\$9.01		185 Berry S	Street						
			Suite 5000							
				sco, CA 94107						
8	PURPOSE OF EXPENDITURE	(a)		ee Categories listed at ion Equipment		<i>'</i>		n, TX	ide of Texas. Com , officeholder living	plete Schedule T. g expense
							Transportation)11		
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	ceholder name	C	Office soug	Jht		Office he	eld
	Date		Payee name							
	07/31/2024		Lyft							
	Amount (\$)		Payee addre	ss; City;	State;	Zip Coo	de			
	\$10.93		185 Berry S	Street						
			Suite 5000							
			San Francis	sco, CA 94107						
	PURPOSE	(a)	Category (se	ee Categories listed at	the top of this sch	edule)	(b) Description			
	OF	l` <i>′</i>		ion Equipment			_ `	outs	ide of Texas. Com	plete Schedule T.
	EXPENDITURE		Expense	ion Equipment	, ina riolatoa	•	Check if Austin	n, TX	, officeholder living	g expense
			•				Transportation	on		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	C	Office soug	yht		Office he	eld
	Date		Payee name							
	09/11/2024		Lyft							
	Amount (\$)		Payee addre	ss; City;	State:	Zip Cod	de			
	\$19.09		185 Berry S		Otato,	p				
	Ψ13.03		•	ni cet						
			Suite 5000							
			San Francis	sco, CA 94107						
	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sche	edule)	(b) Description			
	OF EXPENDITURE			ion Equipment	And Related	I	<u> </u>			plete Schedule T.
	-		Expense						, officeholder living	g expense
							Transportation	ווע		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	C	Office soug	jht		Office he	eld
	me provided by Tayas F	thi:	o Commissi	on ·	MANA Othics s	toto tv ···				Version V// 1 0 //8da51f7

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
_	Sch: 11/18 Rpt: 32/39	Cloud, Carvana (Ms.) Cloud, Carvana (Ms.)
4	Date	5 Payee name
	09/12/2024	Lyft
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$18.31	185 Berry Street
		Suite 5000
		San Francisco, CA 94107
8	PURPOSE	
١	OF	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Expense Check if Austin, TX, officeholder living expense
		Transportation
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/12/2024	Lyft
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.00	185 Berry Street
		Suite 5000
		San Francisco, CA 94107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense
		Transportation
_	Operation ONLY if allowed	Out it is to the later of the state of the s
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/23/2024	Lyft
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.05	185 Berry Street
		Suite 5000
		San Francisco, CA 94107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Expense Check if Austin, TX, officeholder living expense
		Transportation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:		s)
•			<i>-</i>)
L	Sch: 12/18 Rpt: 33/39		
4	Date	5 Payee name	
	09/25/2024	Lyft	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$18.84	185 Berry Street	
		Suite 5000	
		San Francisco, CA 94107	
8	DUDDOCE		
O	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Transportation Equipment And Related Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Transportation	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
_	Date	Davida nama	
		Payee name M2 Craphics	
_	09/24/2024	M3 Graphics	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,060.00	11730 Wilcrest Dr	
		Houston, TX 77009	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Printing Expense	
	LAI LADITURE	Check if Austin, TX, officeholder living expense	
		Signs	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L		•	
	Date	Payee name	
	07/01/2024	Ninfas Original	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$141.07	2704 Navigation Blvd	
		Houston, TX 77003	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Meals	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Gift/Awards/Mer

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/18 Rpt: 34/39	Cloud, Carvana (Ms.) 00084566
4	Date	5 Payee name
	07/29/2024	OfficeMax Depot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$56.82	1576 W Gray S
		Houston, TX 77019
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	07/31/2024	OfficeMax Depot
	Amount (\$)	Payee address; City; State; Zip Code
	\$69.54	1576 W Gray S
	400.01	1010 W Glay G
		Houston, TX 77019
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Supplies
		Campaig. Capping
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/23/2024	OfficeMax Depot
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.32	1576 W Gray S
	7202	
		Houston, TX 77019
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign Supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
g Expense Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.			
1	Total pages Schedule F1: Sch: 14/18 Rpt: 35/39	2 FILER NAME Cloud, Carvana (Ms.)		3 Filer ID 00084		(Ethics Commission Filers)
4	Date 07/31/2024	5 Payee name PayPal				
6	Amount (\$) \$49.98	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 Check if travel of the Check if Austin, Transaction F	TX, officehold		plete Schedule T. expense
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought		Of	fice he	eld
	Date 08/31/2024	Payee name PayPal				
	Amount (\$) \$83.88	Payee address; City; State; Zip Code 2211 North First Street San Jose, CA 95131				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b)	Description Check if travel of the Check if Austin, Transaction F	TX, officehold		plete Schedule T. expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought		Of	fice he	eld
	Date 09/30/2024	Payee name PayPal				
	Amount (\$) \$27.43	Payee address; City; State; Zip Code 2211 North First Street				
		San Jose, CA 95131				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	Description Check if travel of Check if Austin, Transaction F	TX, officehold		plete Schedule T. expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought		Of	fice he	eld

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 15/18 Rpt: 36/39	2 FILER NAME Cloud, Carvana (Ms.) 3 Filer ID (Ethics Commission Filers) 00084566
4	Date 08/05/2024	5 Payee name Pleasant Grove Missionary Baptist Church
6	Amount (\$) \$150.00	7 Payee address; City; State; Zip Code 2801 Conti St
		Houston, TX 77020
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donations
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 08/21/2024	Payee name Road Women
	Amount (\$) \$50.00	Payee address; City; State; Zip Code 1800 Sul Ross Houston, TX 77098
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political Subscription
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 07/03/2024	Payee name Scale to Win
	Amount (\$) \$318.70	Payee address; City; State; Zip Code 13742 Harper Street
		Santa Ana, CA 92703
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Communication Service
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 16/18 Rpt: 37/39	2 FILER NAME Cloud, Carvana (Ms.)	3 Filer ID (Ethics Commission Filers) 00084566
4	Date 08/05/2024	5 Payee name Scale to Win	
6	Amount (\$) \$75.32	7 Payee address; City; State; Zip Code 13742 Harper Street	
8	PURPOSE OF EXPENDITURE	Advertising Expense	nutside of Texas. Complete Schedule T. TX, officeholder living expense DN Service
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 09/05/2024	Payee name Scale to Win	
	Amount (\$) \$268.32	Payee address; City; State; Zip Code 13742 Harper Street Santa Ana, CA 92703	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	nutside of Texas. Complete Schedule T. TX, officeholder living expense on Service
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 09/30/2024	Payee name The Not So Christian Radio Show	
	Amount (\$) \$175.00	Payee address; City; State; Zip Code 5520 Tremper St	
		Houston, TX 77020	
	PURPOSE OF EXPENDITURE	Advertising Expense	nutside of Texas. Complete Schedule T. TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Total manage Calcadada 54	
1	Total pages Schedule F1:	
	Sch: 17/18 Rpt: 38/39	Cloud, Carvana (Ms.) 00084566
4	Date	5 Payee name
	08/15/2024	The Women's Resource of Greater Houston
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$150.00	13100 Northwest Fwy Ste 130
		,
		Houston, TV 77040
		Houston, TX 77040
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if Austin TX officeholder living evennes.
		Candidate/Officeholder/Political Committee
		Donations
<u>_</u>	Complete ONLY !! -!!!	Condidate/Officeholder name
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/08/2024	Third Moon Strategies
	Amount (\$)	Payee address; City; State; Zip Code
	\$425.00	20 Elderwood Drive
		Houston, TX 77058
_	DUDDOGE	1
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Assistant
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	•
_		
	Date	Payee name
	07/15/2024	Third Moon Strategies
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	20 Elderwood Drive
		Houston, TX 77058
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign Assistant
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Political Committee Credit Card Payment		Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 18/18 Rpt: 39/39	Cloud, Car						00084566	
4	Date	5 Payee name							
	07/22/2024	Third Moon							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$425.00	20 Elderwood Drive							
		Houston, T							
8	PURPOSE OF		ee Categories listed at the top of	this schedule)	(b)	Description			
	EXPENDITURE	Salaries/wages/Contract Labor L				Check if Avertin TV efficiencidad living average			
			Check if Austin, TX, officeholder living expense Campaign Assistant				expense		
						Campaign As	داده	ιαπ	
9	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH								
	Date	Payee name							
	09/30/2024	Wesley A.M.E. Church							
	Amount (\$) Payee address; City; State; Zip Code								
	\$100.00 13033 Landmark								
	,								
		Houston, T	X 77045						
	PURPOSE	(a) Category (S	ee Categories listed at the top of	this schedule)	(b)	Description			
OF EXPENDITURE		Contributions/Donations Made By				Check if travel outside of Texas. Complete Schedule T.			
Cand		Candidate/0	Candidate/Officeholder/Political Committee			Check if Austin, TX, officeholder living expense			
						Donations			
	Complete ONLY if direct expenditure to benefit C/OI		ceholder name	Office sou	ght			Office he	eld