

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers) 00086309		2 Total pages filed: 22		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Daniel	MI MI	ELECTRONICALLY FILED 10/08/2024	
	NICKNAME	LAST Lee	SUFFIX		
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)	Date Hand-delivered or Date Postmarked	
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded modified reporting limit			
	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		Receipt #	Amount
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final Report (Attach C/OH-FR)		Date Processed	
5 ORIGINAL PERIOD COVERED	Month Day Year 07/01/2024	THROUGH	Month Day Year 09/26/2024	Date Imaged	

6 EXPLANATION OF CORRECTION

The first did not have any expenses and was missing some of the contributions. I forgot there were expenses that were paid during the period as far as the expenses were concerned, I thought the contributions date was on another day and skipped a page of my contribution sheet when it was submitted. As soon as I figured it out I corrected it.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

Semiannual reports: I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Mr. Daniel Lee

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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00086309	2 Total pages filed: 22	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Daniel	MI MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/08/2024
	NICKNAME	LAST Lee	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 1305 Prairie St STE 300 Houston, TX 77002		ZIP CODE	Date Hand-delivered or Date Postmarked
				Receipt # Amount
				Date Processed
				Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Jose	MI MI	
	NICKNAME	LAST Villagomez	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 20902 teocalli dr katy, TX 77449			
7 CAMPAIGN TREASURER PHONE	AREA CODE (956)	PHONE NUMBER 358-2144	EXTENSION	
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 07/01/2024		THROUGH Month Day Year 09/26/2024	
10 ELECTION	ELECTION DATE Month Day Year 11/05/2024		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) State Representative District 26	

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Lee, Daniel (Mr.) **14 Filer ID** (Ethics Commission Filers)
00086309

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.

COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	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)	\$	12,965.25
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	8,994.52
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	8,122.00
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.

Mr. Daniel Lee

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

Printed name of officer administering

Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Lee, Daniel (Mr.)		19 Filer ID (Ethics Commission Filers) 00086309
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 12,965.25
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 8,994.52
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 A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/14 Rpt: 5/22
2 FILER NAME Lee, Daniel (Mr.)		3 Filer ID (Ethics Commission Filers) 00086309
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahmed, Farha (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77479	
8 Principal occupation / Job title (See Instructions) atty		9 Employer (See Instructions) self
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banieh, Damiane (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77070	
Principal occupation / Job title (See Instructions) District Judge		Employer (See Instructions) State of Texas
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banks, Jessica (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Frisco , TX 75036	
Principal occupation / Job title (See Instructions) Content Strategist		Employer (See Instructions) Team B. Strategy
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berg, Janice (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77080	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bui, Marie (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Austin, TX 78717	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) TRUVISION

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/14 Rpt: 6/22
2 FILER NAME Lee, Daniel (Mr.)		3 Filer ID (Ethics Commission Filers) 00086309
4 Date 08/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casey, Nia (Mrs.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77042	
8 Principal occupation / Job title (See Instructions) MCO		9 Employer (See Instructions) Molina Healthcare
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, Kang (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77036	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) SELF
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheng, Kathy (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77027	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Cheng & Associates PLLC
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheng, Thomas (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Georgetown, TX 78628	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chiang, Eric	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77042	
Principal occupation / Job title (See Instructions) Maintenance Planner		Employer (See Instructions) CBRE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/14 Rpt: 7/22
2 FILER NAME Lee, Daniel (Mr.)		3 Filer ID (Ethics Commission Filers) 00086309
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chionglo, Earvin (Mr.)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code houston, TX 77077	
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Mosaic Paradigm Law Group
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chong, Eugene (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77024	
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) HMC
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cui, Ying (Mrs.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Katy, TX 77494	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Shipping Industry
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Du, Annie (Mrs.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) DM
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franklin, Ida (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Katy, TX 77494	
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Venus Construction

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/14 Rpt: 8/22
2 FILER NAME Lee, Daniel (Mr.)		3 Filer ID (Ethics Commission Filers) 00086309
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Go, Helen (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77036	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Broker		9 Employer (See Instructions) Midland Realty Group
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Daniel (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, David (Mr.) <hr/> Contributor address; City; State; Zip Code Katy, TX 77449	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Trenton Hoyt LLC
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULL, Megan (Mrs.) <hr/> Contributor address; City; State; Zip Code Washington, DC 20009	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Activist		Employer (See Instructions) Self
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammack, Barbara (Mrs.) <hr/> Contributor address; City; State; Zip Code Las Vegas, NV 89128	Amount of Contribution (\$) \$3.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) SS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/14 Rpt: 9/22
2 FILER NAME Lee, Daniel (Mr.)		3 Filer ID (Ethics Commission Filers) 00086309
4 Date 08/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heiberger, Howie (Mr.)	7 Amount of Contribution (\$) \$260.00
	6 Contributor address; City; State; Zip Code Milltown, NJ 08850	
8 Principal occupation / Job title (See Instructions) Caterer		9 Employer (See Instructions) Exquisite Caterers
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huynh, Thao (Mrs.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77065	
Principal occupation / Job title (See Instructions) Chiropractic		Employer (See Instructions) 290 Pain and Rehab
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janda, Kenneth (Mr.)	Amount of Contribution (\$) \$126.00
	Contributor address; City; State; Zip Code Katy, TX 77494	
Principal occupation / Job title (See Instructions) University Faculty		Employer (See Instructions) UH
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kannenberg, Wade (Mr.)	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code Sherman, TX 75090	
Principal occupation / Job title (See Instructions) Electronic Technician		Employer (See Instructions) Texas Instruments
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuo, David (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Sr. VP & Chief Legal Officer		Employer (See Instructions) Applied Optoelectronics Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/14 Rpt: 10/22
2 FILER NAME Lee, Daniel (Mr.)		3 Filer ID (Ethics Commission Filers) 00086309
4 Date 08/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuo, Jack (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77063	
8 Principal occupation / Job title (See Instructions) Banker		9 Employer (See Instructions) Preferred Bank
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Le, Thinh (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77072	
Principal occupation / Job title (See Instructions) Admin		Employer (See Instructions) Le Law Group PLLC
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Daniel C Y (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Katy, TX 77494	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) C Y Lee Legal Group PLLC
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Mitchell (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Plano, TX 75024	
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Nellie (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Sachse, TX 75048	
Principal occupation / Job title (See Instructions) Compliance		Employer (See Instructions) Republic Elite

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/14 Rpt: 11/22
2 FILER NAME Lee, Daniel (Mr.)		3 Filer ID (Ethics Commission Filers) 00086309
4 Date 09/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Victor (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77027	
8 Principal occupation / Job title (See Instructions) Management		9 Employer (See Instructions) STOA Architects
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lin, chaohui (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Sugar Land , TX 77479	
Principal occupation / Job title (See Instructions) Seafood Salesman		Employer (See Instructions) Fei's Shrimp
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mann, Mildred (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Katy, TX 77450	
Principal occupation / Job title (See Instructions) Medical Laboratory Assistant II		Employer (See Instructions) Houston Methodist Hospital
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mar, Mike (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77064	
Principal occupation / Job title (See Instructions) Advisor		Employer (See Instructions) Engie
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Jean (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Katy, TX 77494	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) BP Corp North America Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/14 Rpt: 12/22
2 FILER NAME Lee, Daniel (Mr.)		3 Filer ID (Ethics Commission Filers) 00086309
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Masshoor, Awesta (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77494	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Schneider Electric
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ng, Paul (Mr.) <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self-Employed		Employer (See Instructions) KPL
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, David (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77070	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law office of David Nguyen PC
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Giao (Mr.) <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) Slingshot Aerospace
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Kevin (Mr.) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$260.00
Principal occupation / Job title (See Instructions) Selfemployed		Employer (See Instructions) self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/14 Rpt: 13/22
2 FILER NAME Lee, Daniel (Mr.)		3 Filer ID (Ethics Commission Filers) 00086309
4 Date 08/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patel, Kim-Anh (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77079	7 Amount of Contribution (\$) \$126.00
8 Principal occupation / Job title (See Instructions) unemployed		9 Employer (See Instructions) unemployed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phuah, Han (Mr.) <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) Data Analysis		Employer (See Instructions) Citibank
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rash, Ronald (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77036	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Gerry (Mr.) <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$525.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sam, Kenny (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Radiology Partners

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/14 Rpt: 14/22
2 FILER NAME Lee, Daniel (Mr.)		3 Filer ID (Ethics Commission Filers) 00086309
4 Date 09/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shih, Helen (Mrs.)	7 Amount of Contribution (\$) \$300.00
	6 Contributor address; City; State; Zip Code Pearland, TX 77584	
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Flow-of-light Natural Health
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Adam (Mr.)	Amount of Contribution (\$) \$62.00
	Contributor address; City; State; Zip Code San Diego, CA 92123	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Solar Turbines Company
Date 08/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sy, Jennifer (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77004	
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) OCD Institute
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sy, Jennifer (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77004	
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) OCD Institute
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thai, Michael (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Sachse, TX 75048	
Principal occupation / Job title (See Instructions) Assistant Manager		Employer (See Instructions) First IC Bank

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/14 Rpt: 15/22
2 FILER NAME Lee, Daniel (Mr.)		3 Filer ID (Ethics Commission Filers) 00086309
4 Date 08/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tran, Bao (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77071	7 Amount of Contribution (\$) \$162.00
8 Principal occupation / Job title (See Instructions) Self-employed		9 Employer (See Instructions) Bao Tran
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Transhealth Clinic <hr/> Contributor address; City; State; Zip Code Houston, TX 77036	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villagomez, Jose (Mr.) <hr/> Contributor address; City; State; Zip Code katy, TX 77449	Amount of Contribution (\$) \$126.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vu, Vincent (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77036	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Vu Law Firm
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Teana (Mrs.) <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/14 Rpt: 16/22
2 FILER NAME Lee, Daniel (Mr.)		3 Filer ID (Ethics Commission Filers) 00086309
4 Date 09/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Teana (Mrs.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Stafford, TX 77477	
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Fort Bend County
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Elizabeth (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Alamogordo, NM 88310	
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wong, Catherine (Mrs.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Sammamish, WA 98075	
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yang, Steve (Mr.)	Amount of Contribution (\$) \$126.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77478	
Principal occupation / Job title (See Instructions) Insurance agent		Employer (See Instructions) Steve Yang State Farm
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yoo, Daniel (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77224	
Principal occupation / Job title (See Instructions) Self-employed		Employer (See Instructions) Daniel Yoo

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/14 Rpt: 17/22
2 FILER NAME Lee, Daniel (Mr.)		3 Filer ID (Ethics Commission Filers) 00086309
4 Date 08/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zhou, Mingming (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77082	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Radio Hostess		9 Employer (See Instructions) TX Chinese Radio
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) hoang, thai (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lee, chung (Mr.) <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) C Y Lee Legal Group
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) li, kenneth (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77036	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Southwest Realty Group
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) markowitz, eliz (Miss) <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$126.00
Principal occupation / Job title (See Instructions) educator		Employer (See Instructions) UH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/14 Rpt: 18/22
2 FILER NAME Lee, Daniel (Mr.)		3 Filer ID (Ethics Commission Filers) 00086309
4 Date 08/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) nguyen, Hung (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Richmond, TX 77407	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) QA Analyst		9 Employer (See Instructions) Cox Automotive
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) vlahakos, paula (Mrs.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) mvs

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 G: Sch: 1/4 Rpt: 19/22	2 FILER NAME Lee, Daniel (Mr.)	3 Filer ID (Ethics Commission Filers) 00086309
4 Date 09/01/2024	5 Payee name Amazon	
6 Amount (\$) \$64.85 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 24285 Katy Fwy Suite 300 Katy, TX 77449	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postcards
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 09/17/2024	Payee name Amazon	
Amount (\$) \$55.45 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 24285 Katy Fwy Suite 300 Katy, TX 77449	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ink cartirdges
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 08/22/2024	Payee name BRaman Winery	
Amount (\$) \$341.70 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 3421 FM 359 Richmond, TX 77406	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Winery- for location
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 G: Sch: 2/4 Rpt: 20/22	2 FILER NAME Lee, Daniel (Mr.)	3 Filer ID (Ethics Commission Filers) 00086309
4 Date 08/08/2024	5 Payee name Braman Brands	
6 Amount (\$) \$150.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 3421 FM 359 Richmond, TX 77406	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense deposit for event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/10/2024	Payee name Community Impact	
Amount (\$) \$1,169.89 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 3600 E. Palm Valley Blvd Box #3 Round Rock, TX 78665	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper ad
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/17/2024	Payee name Discount STamps	
Amount (\$) \$400.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1077 N. Willow Ave Clovis, CA 93611	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stamps
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 G: Sch: 3/4 Rpt: 21/22	2 FILER NAME Lee, Daniel (Mr.)	3 Filer ID (Ethics Commission Filers) 00086309
4 Date 09/16/2024	5 Payee name Hunan BaoBae	
6 Amount (\$) \$219.32 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1575 W Grand Pkwy S #300, katy, TX 77494	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food for event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/13/2024	Payee name M3	
Amount (\$) \$3,090.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 11730 Wilcrest Dr Houston, TX 77099	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/20/2024	Payee name Palios Pizza	
Amount (\$) \$179.19 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1450 W Grand Pkwy S Suite K Katy, TX 77494	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pizza
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 G: Sch: 4/4 Rpt: 22/22	2 FILER NAME Lee, Daniel (Mr.)	3 Filer ID (Ethics Commission Filers) 00086309
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4 Date 09/23/2024	5 Payee name Steam Dumpling
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6 Amount (\$) \$163.28 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 6645 S Fry Rd #800 Katy, TX 77494
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Steam dumplings
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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 08/13/2024	Payee name uz marketing
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Amount (\$) \$3,160.84 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 5900 Bingle Rd Houston, TX 77092
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense signs and palm cards, tshirts
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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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