

# COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT

FORM CEC  
COVER SHEET PG 1

|  |   |   |  |
|--|---|---|--|
| <b>The CEC Instruction Guide explains how to complete this form.</b>                   |   | 1 Filer ID (Ethics Commission Filers)<br>00017074           | 2 Total pages filed:<br>21   |
| 3 COMMITTEE NAME<br>Brazoria County Democratic Party (CEC)                             |   | <b>OFFICE USE ONLY</b>                                      |  |
|  |   | Date Received<br>ELECTRONICALLY FILED<br>10/26/2024         |  |
| 4 COMMITTEE ADDRESS<br><br><input type="checkbox"/> Change of Address                  | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>3215 Amerson Dr.<br><br>Pearland, TX 77584                  |   |  |
|  | Date Hand-delivered or Date Postmarked  |   |  |
|  | Receipt #   | Amount  |  |
|  | Date Processed  |   |  |
|  |   | Date Imaged   |  |
| 5 CAMPAIGN TREASURER NAME  | MS / MRS / MR   | FIRST   | MI   |
|  | Mr.   | Jose R.   |  |
|  |   | NICKNAME  | LAST SUFFIX  |
|  |   | Joe   | Parra  |
| 6 CAMPAIGN TREASURER STREET ADDRESS<br><small>(Residence or Business)</small>          | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>3215 Amerson Dr.<br><br>Pearland, TX 77584 |   |  |
|  | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>3215 Amerson Dr.<br><br>Pearland, TX 77584                  |   |  |
| 7 CAMPAIGN TREASURER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>3215 Amerson Dr.<br><br>Pearland, TX 77584 |   |  |
|  | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>3215 Amerson Dr.<br><br>Pearland, TX 77584                  |   |  |
| 8 CAMPAIGN TREASURER PHONE   | AREA CODE   | PHONE NUMBER  | EXTENSION  |
|  | (281)   | 451-9484  |  |
| 9 REPORT TYPE  | <input type="checkbox"/> January 15   | <input type="checkbox"/> 30th day before election           | <input type="checkbox"/> Final Report                                  |
|  | <input type="checkbox"/> July 15  | <input checked="" type="checkbox"/> 8th day before election | <input type="checkbox"/> 10th day after campaign treasurer termination |
|  |   | <input type="checkbox"/> Runoff                             |  |
|  |   |   |  |
| 10 PERIOD COVERED  | Month Day Year<br>09/27/2024  | THROUGH   | Month Day Year<br>10/26/2024   |
| 11 ELECTION  | ELECTION DATE<br>Month Day Year<br>11/05/2024   | ELECTION TYPE   |  |
|  |   | <input type="checkbox"/> Primary                            | <input type="checkbox"/> Runoff  |
|  |   | <input checked="" type="checkbox"/> General                 | <input type="checkbox"/> Special                                       |
| <b>GO TO PAGE 2</b>  |   |   |  |

# COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC  
COVER SHEET PG 2

|  |   |
|--|---|
| <b>12 COMMITTEE NAME</b><br>Brazoria County Democratic Party (CEC) | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00017074 |
|--|---|

|   |  |              |
|---|--|--------------|
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported |
|   |  | B. Opposed   |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported |
|   |  | B. Opposed   |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |              |

|                               |  |              |
|-------------------------------|--|--------------|
| <b>15 CONTRIBUTION TOTALS</b> | <b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> | \$ 0.00      |
|                               | <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold                                 |              |
|                               | <b>2. TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)   | \$ 7,589.00  |
| EXPENDITURE TOTALS            | <b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>  | \$ 0.00      |
|                               | <b>4. TOTAL POLITICAL EXPENDITURES</b>   | \$ 24,973.60 |
| CONTRIBUTION BALANCE          | <b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>  | \$ 6,336.37  |
| OUTSTANDING LOAN TOTALS       | <b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>   | \$ 0.00      |

**16 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. Jose R. Parra  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

**SUBTOTALS - CEC****FORM CEC**  
**COVER SHEET PG 3**  
3 of 21

|  |   |                                |                            |
|--|---|--------------------------------|----------------------------|
| <b>17 COMMITTEE NAME</b><br>Brazoria County Democratic Party (CEC) |   | <b>18 Filer ID</b><br>00017074 | (Ethics Commission Filers) |
| <b>19 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE                   |   | SUBTOTAL AMOUNT                |                            |
| 1.   | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                           | \$                             | 7,589.00                   |
| 2.   | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS             | \$                             | 0.00                       |
| 3.   | <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS                                       | \$                             | 0.00                       |
| 4.   | <input checked="" type="checkbox"/> SCHEDULE E: LOANS   | \$                             | 0.00                       |
| 5.   | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS        | \$                             | 24,973.60                  |
| 6.   | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                | \$                             | 0.00                       |
| 7.   | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                  | \$                             |                            |
| 8.   | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                           | \$                             | 0.00                       |
| 9.   | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                | \$                             |                            |
| 10.  | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$                             |                            |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>           |  | <b>1</b> Total pages Schedule A1:<br>Sch: 1/12 Rpt: 4/21 |
| <b>2</b> FILER NAME<br>Brazoria County Democratic Party (CEC)              |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00017074 |
| <b>4</b> Date<br>10/07/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>AYERS, CLAUDETTE<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77584 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>UNEMPLOYED |  | <b>9</b> Employer (See Instructions)<br>UNEMPLOYED       |
| Date<br>10/22/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>BAIRD, STEPHANIE<br><hr/> Contributor address; City; State; Zip Code<br><br>MANVEL, TX 77578                     | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>NURSE               |  | Employer (See Instructions)<br>HOME HEALTH               |
| Date<br>10/17/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>BRENNAN, KATHLEEN<br><hr/> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77584                  | Amount of Contribution (\$)<br><br>\$20.00               |
| Principal occupation / Job title (See Instructions)<br>UNEMPLOYED          |  | Employer (See Instructions)<br>UNEMPLOYED                |
| Date<br>10/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>BRYAN-WILSON, DARCY<br><hr/> Contributor address; City; State; Zip Code<br><br>BROOKSIDE VILLAGE, TX 77581       | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>HOUSEWIFE           |  | Employer (See Instructions)                              |
| Date<br>10/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>BUCHANAN-HARRINGTON, ROBIN<br><hr/> Contributor address; City; State; Zip Code<br><br>FREEPORT, TX 77541         | Amount of Contribution (\$)<br><br>\$16.00               |
| Principal occupation / Job title (See Instructions)<br>UNEMPLOYED          |  | Employer (See Instructions)<br>UNEMPLOYED                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>         |   | <b>1</b> Total pages Schedule A1:<br>Sch: 2/12 Rpt: 5/21 |
| <b>2</b> FILER NAME<br>Brazoria County Democratic Party (CEC)            |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00017074 |
| <b>4</b> Date<br>10/17/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>BURNS, UBAH<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>MANVEL, TX 77578 | <b>7</b> Amount of Contribution (\$)<br><br>\$11.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>EDUCATOR |   | <b>9</b> Employer (See Instructions)<br>HISD             |
| Date<br>10/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>CAREY-BAY, ERMA<br><hr/> Contributor address; City; State; Zip Code<br><br>MANVEL, TX 77578               | Amount of Contribution (\$)<br><br>\$10.00               |
| Principal occupation / Job title (See Instructions)<br>ATTORNEY          |   | Employer (See Instructions)<br>SELF EMPLOYED             |
| Date<br>10/17/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>CARTER, JUANITA<br><hr/> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77584             | Amount of Contribution (\$)<br><br>\$34.00               |
| Principal occupation / Job title (See Instructions)<br>OFFICER           |   | Employer (See Instructions)<br>GOVERNMENT                |
| Date<br>10/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>CECALEK, PATRICIA<br><hr/> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77584           | Amount of Contribution (\$)<br><br>\$100.00              |
| Principal occupation / Job title (See Instructions)<br>UNEMPLOYED        |   | Employer (See Instructions)<br>UNEMPLOYED                |
| Date<br>10/17/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>CLAY, ALEXANDRA<br><hr/> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77584             | Amount of Contribution (\$)<br><br>\$60.00               |
| Principal occupation / Job title (See Instructions)<br>UNEMPLOYED        |   | Employer (See Instructions)<br>UNEMPLOYED                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 3/12 Rpt: 6/21 |
| <b>2</b> FILER NAME<br>Brazoria County Democratic Party (CEC)           |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00017074 |
| <b>4</b> Date<br>10/17/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>CLAYTON, DAVID<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>MISSOURI CITY, TX 77455 | <b>7</b> Amount of Contribution (\$)<br><br>\$30.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>TEACHER |   | <b>9</b> Employer (See Instructions)<br>FBISD            |
| Date<br>10/17/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>COSKREY, VALERIE<br><hr/> Contributor address; City; State; Zip Code<br><br>SWEENEY, TX 77480                       | Amount of Contribution (\$)<br><br>\$5.00                |
| Principal occupation / Job title (See Instructions)<br>UNEMPLOYED       |   | Employer (See Instructions)<br>UNEMPLOYED                |
| Date<br>10/22/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>COUNTISS, JULIE<br><hr/> Contributor address; City; State; Zip Code<br><br>HOUSTON, TX 77266                        | Amount of Contribution (\$)<br><br>\$750.00              |
| Principal occupation / Job title (See Instructions)<br>ATTORNEY         |   | Employer (See Instructions)<br>HARRIS COUNTY             |
| Date<br>10/22/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>CRAWFORD , LEWIS<br><hr/> Contributor address; City; State; Zip Code<br><br>ANGLETON, TX 77515                      | Amount of Contribution (\$)<br><br>\$10.00               |
| Principal occupation / Job title (See Instructions)<br>OFFICE MANAGER   |   | Employer (See Instructions)<br>IUOE LOCAL 564            |
| Date<br>10/17/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>DELOACH, ALLISON<br><hr/> Contributor address; City; State; Zip Code<br><br>HOUSTON, TX 77023                       | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>UNEMPLOYED       |   | Employer (See Instructions)<br>UNEMPLOYED                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>                 |  | <b>1</b> Total pages Schedule A1:<br>Sch: 4/12 Rpt: 7/21 |
| <b>2</b> FILER NAME<br>Brazoria County Democratic Party (CEC)                    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00017074 |
| <b>4</b> Date<br>10/17/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>DULL, TAYLOR<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>MANVEL, TX 77578 | <b>7</b> Amount of Contribution (\$)<br><br>\$5.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>FLIGHT ATTENDANT |  | <b>9</b> Employer (See Instructions)<br>UNITED           |
| Date<br>10/17/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>FEULESS, SCOTT<br><hr/> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77584               | Amount of Contribution (\$)<br><br>\$10.00               |
| Principal occupation / Job title (See Instructions)<br>AUTHOR/CONSULTANT         |  | Employer (See Instructions)<br>SELF EMPLOYED             |
| Date<br>10/17/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>FINNEY, CYNTHIA<br><hr/> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77584              | Amount of Contribution (\$)<br><br>\$25.00               |
| Principal occupation / Job title (See Instructions)<br>UNEMPLOYED                |  | Employer (See Instructions)<br>UNEMPLOYED                |
| Date<br>10/17/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>FOWLER, THOMAS<br><hr/> Contributor address; City; State; Zip Code<br><br>LAKE JACKSON, TX 77566           | Amount of Contribution (\$)<br><br>\$10.00               |
| Principal occupation / Job title (See Instructions)<br>UNEMPLOYED                |  | Employer (See Instructions)<br>UNEMPLOYED                |
| Date<br>10/22/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>GAUTNEY, SUZANNE<br><hr/> Contributor address; City; State; Zip Code<br><br>ANGLETON, TX 77515             | Amount of Contribution (\$)<br><br>\$5.00                |
| Principal occupation / Job title (See Instructions)<br>RETIRED                   |  | Employer (See Instructions)<br>NONE                      |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 5/12 Rpt: 8/21 |
| <b>2</b> FILER NAME<br>Brazoria County Democratic Party (CEC)           |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00017074 |
| <b>4</b> Date<br>10/17/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>HAMLIN, BRIAN<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77584 | <b>7</b> Amount of Contribution (\$)<br><br>\$30.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>TEACHER |   | <b>9</b> Employer (See Instructions)<br>PASADENA ISD     |
| Date<br>10/09/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>HARRIS, DARLA<br><hr/> Contributor address; City; State; Zip Code<br><br>ROSHARON, TX 77583                   | Amount of Contribution (\$)<br><br>\$50.00               |
| Principal occupation / Job title (See Instructions)<br>CCR SUPERVISOR   |   | Employer (See Instructions)<br>HHSC - CCR                |
| Date<br>10/17/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>HASSAN, MEAGAN<br><hr/> Contributor address; City; State; Zip Code<br><br>HOUSTON, TX 77008                   | Amount of Contribution (\$)<br><br>\$500.00              |
| Principal occupation / Job title (See Instructions)<br>ATTORNEY         |   | Employer (See Instructions)<br>SELF EMPLOYED             |
| Date<br>10/17/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>HIGHTOWER, RICHARD<br><hr/> Contributor address; City; State; Zip Code<br><br>HOUSTON, TX 77019               | Amount of Contribution (\$)<br><br>\$1,000.00            |
| Principal occupation / Job title (See Instructions)<br>ATTORNEY         |   | Employer (See Instructions)<br>Self Employed             |
| Date<br>10/09/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>JACKSON, DELORES<br><hr/> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77584                | Amount of Contribution (\$)<br><br>\$20.00               |
| Principal occupation / Job title (See Instructions)<br>UNEMPLOYED       |   | Employer (See Instructions)<br>UNEMPLOYED                |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>            |   | <b>1</b> Total pages Schedule A1:<br>Sch: 6/12 Rpt: 9/21 |
| <b>2</b> FILER NAME<br>Brazoria County Democratic Party (CEC)               |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00017074 |
| <b>4</b> Date<br>10/09/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>JOHNSON, SARAH<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>LEAGUE CITY, TX 77573 | <b>7</b> Amount of Contribution (\$)<br><br>\$15.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>LAB MANAGER |   | <b>9</b> Employer (See Instructions)<br>MD ANDERSON      |
| Date<br>10/17/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>JONES, GARY<br><hr/> Contributor address; City; State; Zip Code<br><br>LAKE JACKSON, TX 77566                     | Amount of Contribution (\$)<br><br>\$10.00               |
| Principal occupation / Job title (See Instructions)<br>RETIRED              |   | Employer (See Instructions)<br>RETIRED                   |
| Date<br>09/30/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>KEEP AL GREEN IN CONGRESS<br><hr/> Contributor address; City; State; Zip Code<br><br>HOUSTON, TX 77054            | Amount of Contribution (\$)<br><br>\$500.00              |
| Principal occupation / Job title (See Instructions)                         |   | Employer (See Instructions)                              |
| Date<br>10/13/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>KEEP AL GREEN IN CONGRESS<br><hr/> Contributor address; City; State; Zip Code<br><br>HOUSTON, TX 77054            | Amount of Contribution (\$)<br><br>\$500.00              |
| Principal occupation / Job title (See Instructions)                         |   | Employer (See Instructions)                              |
| Date<br>10/22/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>LANDAU, SARAH BETH<br><hr/> Contributor address; City; State; Zip Code<br><br>HOUSTON, TX 77009                   | Amount of Contribution (\$)<br><br>\$1,000.00            |
| Principal occupation / Job title (See Instructions)<br>ATTORNEY             |   | Employer (See Instructions)<br>HARRIS COUNTY             |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |   |
|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>               |   | <b>1</b> Total pages Schedule A1:<br>Sch: 7/12 Rpt: 10/21         |
| <b>2</b> FILER NAME<br>Brazoria County Democratic Party (CEC)                  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00017074          |
| <b>4</b> Date<br>10/02/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>MACASKIE, ROSEMARY W.<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77584 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00               |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Office Manager |   | <b>9</b> Employer (See Instructions)<br>Machining Specialists Inc |
| Date<br>10/22/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>MARTIN, ZACHERY<br><hr/> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77584                         | Amount of Contribution (\$)<br><br>\$45.00                        |
| Principal occupation / Job title (See Instructions)<br>CONSTRUCTION MANAGER    |   | Employer (See Instructions)<br>DESIGNS                            |
| Date<br>10/22/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>MATHIS, S W<br><hr/> Contributor address; City; State; Zip Code<br><br>ROSHARON, TX 77583                             | Amount of Contribution (\$)<br><br>\$25.00                        |
| Principal occupation / Job title (See Instructions)<br>CAREGIVER               |   | Employer (See Instructions)<br>SELF EMPLOYED                      |
| Date<br>10/22/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>MORGAN, CHARLES<br><hr/> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77584                         | Amount of Contribution (\$)<br><br>\$25.00                        |
| Principal occupation / Job title (See Instructions)<br>UNEMPLOYED              |   | Employer (See Instructions)<br>UNEMPLOYED                         |
| Date<br>10/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>MUNRO, ROBERT<br><hr/> Contributor address; City; State; Zip Code<br><br>ANGELTON, TX 77515                           | Amount of Contribution (\$)<br><br>\$25.00                        |
| Principal occupation / Job title (See Instructions)<br>RETIRED                 |   | Employer (See Instructions)<br>RETIRED                            |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |   |
|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>                        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 8/12 Rpt: 11/21 |
| <b>2</b> FILER NAME<br>Brazoria County Democratic Party (CEC)                           |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00017074  |
| <b>4</b> Date<br>10/09/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>MYERS, LAURA G<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>ALVIN, TX 77511 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>RENTAL PROPERTY MANAGER |   | <b>9</b> Employer (See Instructions)<br>SELF EMPLOYED     |
| Date<br>10/04/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>McCLELLAN, ELIAS<br><hr/> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77584              | Amount of Contribution (\$)<br><br>\$34.00                |
| Principal occupation / Job title (See Instructions)<br>Accountant                       |   | Employer (See Instructions)<br>UNIVERSITY OF HOUSTON      |
| Date<br>10/17/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>OLIVAREZ, ANNA<br><hr/> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77585                | Amount of Contribution (\$)<br><br>\$10.00                |
| Principal occupation / Job title (See Instructions)<br>ADMINISTRATION                   |   | Employer (See Instructions)<br>CITY OF PEARLAND           |
| Date<br>10/09/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>PARRA, JOSE<br><hr/> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77584                   | Amount of Contribution (\$)<br><br>\$60.00                |
| Principal occupation / Job title (See Instructions)<br>ACCOUNTANT                       |   | Employer (See Instructions)<br>KINETICA PARTNERS LLC      |
| Date<br>10/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>POLK, AMANDA<br><hr/> Contributor address; City; State; Zip Code<br><br>MANVEL, TX 77578                    | Amount of Contribution (\$)<br><br>\$5.00                 |
| Principal occupation / Job title (See Instructions)<br>NURSE                            |   | Employer (See Instructions)<br>MD ANDERSON CANCER CENTER  |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |   |
|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>          |   | <b>1</b> Total pages Schedule A1:<br>Sch: 9/12 Rpt: 12/21     |
| <b>2</b> FILER NAME<br>Brazoria County Democratic Party (CEC)             |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00017074      |
| <b>4</b> Date<br>10/22/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>RIVERA, EDUARDO<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77584 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00           |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>POLICEMAN |   | <b>9</b> Employer (See Instructions)<br>HARRIS COUNTY SHERIFF |
| Date<br>10/09/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>ROEBUCK, CRYSTAL<br><hr/> Contributor address; City; State; Zip Code<br><br>HOUSTON, TX 77012                   | Amount of Contribution (\$)<br><br>\$25.00                    |
| Principal occupation / Job title (See Instructions)<br>HAIRSTYLIST        |   | Employer (See Instructions)<br>BEAUTIQUE SALON AND SPA        |
| Date<br>10/12/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>SCHAUER, JOAN<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearland, TX 77584                     | Amount of Contribution (\$)<br><br>\$897.00                   |
| Principal occupation / Job title (See Instructions)<br>RETIRED            |   | Employer (See Instructions)<br>UNEMPLOYED                     |
| Date<br>10/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>SCHOCKMEL, BERNADINE<br><hr/> Contributor address; City; State; Zip Code<br><br>RICHWOOD, TX 77531              | Amount of Contribution (\$)<br><br>\$20.00                    |
| Principal occupation / Job title (See Instructions)<br>UNEMPLOYED         |   | Employer (See Instructions)<br>UNEMPLOYED                     |
| Date<br>10/17/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>SCHROEDER, ELAINE<br><hr/> Contributor address; City; State; Zip Code<br><br>CLUTE, TX 77531                    | Amount of Contribution (\$)<br><br>\$50.00                    |
| Principal occupation / Job title (See Instructions)<br>ENGINEER           |   | Employer (See Instructions)<br>DOW                            |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>          |  | <b>1</b> Total pages Schedule A1:<br>Sch: 10/12 Rpt: 13/21 |
| <b>2</b> FILER NAME<br>Brazoria County Democratic Party (CEC)             |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00017074   |
| <b>4</b> Date<br>10/09/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>SHETLER, ANN<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77584 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>DIETITIAN |  | <b>9</b> Employer (See Instructions)<br>PEARLAND ISD       |
| Date<br>10/04/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>SHIH, HELEN<br><hr/> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77584                    | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)<br>CONSULTANT         |  | Employer (See Instructions)<br>LOW-OF-LIGHT NATURAL HEALTH |
| Date<br>10/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>SINGLETON, BECKY<br><hr/> Contributor address; City; State; Zip Code<br><br>MANVEL, TX 77578                 | Amount of Contribution (\$)<br><br>\$32.00                 |
| Principal occupation / Job title (See Instructions)<br>BUSINESS OWNER     |  | Employer (See Instructions)<br>GULF COAST ENVIROSHIELD     |
| Date<br>10/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>SNAPP, COOPER<br><hr/> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77581                  | Amount of Contribution (\$)<br><br>\$20.00                 |
| Principal occupation / Job title (See Instructions)<br>ENGINEER           |  | Employer (See Instructions)<br>NASA                        |
| Date<br>10/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>SNAPP, LEILANI<br><hr/> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77581                 | Amount of Contribution (\$)<br><br>\$20.00                 |
| Principal occupation / Job title (See Instructions)<br>MANAGER            |  | Employer (See Instructions)<br>SPIRIT HALLOWEEN            |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |   |
|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>         |   | <b>1</b> Total pages Schedule A1:<br>Sch: 11/12 Rpt: 14/21  |
| <b>2</b> FILER NAME<br>Brazoria County Democratic Party (CEC)            |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00017074    |
| <b>4</b> Date<br>10/13/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>SPAIN, CHARLES<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>HOUSTON, TX 77006 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,000.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>ATTORNEY |   | <b>9</b> Employer (See Instructions)<br>SELF EMPLOYED       |
| Date<br>10/04/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>SUTTLES, SYRETHEAL<br><hr/> Contributor address; City; State; Zip Code<br><br>MANVEL, TX 77578                | Amount of Contribution (\$)<br><br>\$40.00                  |
| Principal occupation / Job title (See Instructions)<br>UNEMPLOYED        |   | Employer (See Instructions)<br>UNEMPLOYED                   |
| Date<br>10/17/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>TEPPER, SHEILA<br><hr/> Contributor address; City; State; Zip Code<br><br>LAKE JACKSON, TX 77566              | Amount of Contribution (\$)<br><br>\$5.00                   |
| Principal occupation / Job title (See Instructions)<br>SUB TEACHER       |   | Employer (See Instructions)<br>BRAZORIA IND SCHOOL DISTRICT |
| Date<br>10/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>VAN CLEVE, JUDY<br><hr/> Contributor address; City; State; Zip Code<br><br>PEARLAND, TX 77584                 | Amount of Contribution (\$)<br><br>\$10.00                  |
| Principal occupation / Job title (See Instructions)<br>PR CONSULTANT     |   | Employer (See Instructions)<br>VAN CLEVE-HOUSTON PR         |
| Date<br>10/17/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>VOSS, JOHNNY<br><hr/> Contributor address; City; State; Zip Code<br><br>ANGLETON, TX 77515                    | Amount of Contribution (\$)<br><br>\$20.00                  |
| Principal occupation / Job title (See Instructions)<br>UNEMPLOYED        |   | Employer (See Instructions)<br>UNEMPLOYED                   |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>              |   | <b>1</b> Total pages Schedule A1:<br>Sch: 12/12 Rpt: 15/21 |
| <b>2</b> FILER NAME<br>Brazoria County Democratic Party (CEC)                 |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00017074   |
| <b>4</b> Date<br>10/07/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>WHITNEY, FAYE ASHLEY<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>HOUSTON, TX 77042 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>UNEMPLOYED    |   | <b>9</b> Employer (See Instructions)<br>UNEMPLOYED         |
| <b>Date</b><br>10/09/2024   | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>WILTZ, QUENTIN (Mr.)<br><hr/> <b>Contributor address; City; State; Zip Code</b><br><br>PEARLAND, TX 77584    | <b>Amount of Contribution (\$)</b><br><br>\$100.00         |
| <b>Principal occupation / Job title (See Instructions)</b><br>PROJECT MANAGER |   | <b>Employer (See Instructions)</b><br>STUPP                |

# PLEGGED CONTRIBUTIONS

# SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:  
Sch: 1/1 Rpt: 16/21

2 FILER NAME  
Brazoria County Democratic Party (CEC)

3 Filer ID (Ethics Commission Filers)  
00017074

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor  out-of-state PAC (ID#: \_\_\_\_\_)

8 Amount of  
pledge (\$)

9 In-kind description  
(If applicable)

7 Pledgor Address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)



# LOANS

# SCHEDULE E

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>           |  | <b>1</b> Total pages Schedule E:<br>Sch: 1/1 Rpt: 17/21  |
| <b>2</b> FILER NAME<br>Brazoria County Democratic Party (CEC)              |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00017074   |
| <b>4</b> TOTAL OF UNITEMIZED LOANS   |  | <b>\$</b> 0.00   |
| <b>5</b> Date of loan  | <b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) | <b>9</b> Loan Amount (\$)  |
| <b>6</b> Is lender a financial institution?                                | <b>8</b> Lender address; City; State; Zip Code                                 | <b>10</b> Interest Rate  |
|  |  | <b>11</b> Maturity Date  |
| <b>12</b> Principal occupation / Job title (See Instructions)              |  | <b>13</b> Employer (See Instructions)  |
| <b>14</b> Description of Collateral<br><input type="checkbox"/> None       |  | <b>15</b> Check if personal funds were deposited into political account (See Instructions)<br><input type="checkbox"/> |
| <b>16</b> GUARANTOR INFORMATION<br><input type="checkbox"/> not applicable | <b>17</b> Name of guarantor  | <b>19</b> Amount Guaranteed (\$)   |
|  | <b>18</b> Guarantor address; City; State; Zip Code                             |  |
| <b>20</b> Principal occupation   |  | <b>21</b> Employer (See Instructions)  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 1/4 Rpt: 18/21 | <b>2</b> FILER NAME<br>Brazoria County Democratic Party (CEC) | <b>3</b> Filer ID (Ethics Commission Filers)<br>00017074 |
|--|---|--|

|                             |                                |
|-----------------------------|--------------------------------|
| <b>4</b> Date<br>10/22/2024 | <b>5</b> Payee name<br>ACTBLUE |
|-----------------------------|--------------------------------|

|                                  |  |
|----------------------------------|--|
| <b>6</b> Amount (\$)<br>\$180.55 | <b>7</b> Payee address; City; State; Zip Code<br>P O BOX 441146<br><br>SOMMERVILLE, ME 02144 |
|----------------------------------|--|

|                                 |   |  |
|---------------------------------|---|--|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>FEES |
|---------------------------------|---|--|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

|                    |                                     |
|--------------------|-------------------------------------|
| Date<br>10/23/2024 | Payee name<br>DICK'S SPORTING GOODS |
|--------------------|-------------------------------------|

|                         |   |
|-------------------------|---|
| Amount (\$)<br>\$183.98 | Payee address; City; State; Zip Code<br>11200 BROADWAY STREET<br><br>PEARLAND, TX 77584 |
|-------------------------|---|

|                               |  |  |
|-------------------------------|--|--|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Polling Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>TENT |
|-------------------------------|--|--|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|                    |                            |
|--------------------|----------------------------|
| Date<br>10/21/2024 | Payee name<br>GO DADDY.COM |
|--------------------|----------------------------|

|                         |  |
|-------------------------|--|
| Amount (\$)<br>\$533.72 | Payee address; City; State; Zip Code<br>14455 N HAYDEN ROAD<br>SUITE 219<br>SCOTTSDALE, AZ 85260 |
|-------------------------|--|

|                               |   |   |
|-------------------------------|---|---|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>WEBSITE |
|-------------------------------|---|---|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|  |  |
|--|--|
|  |  |
|--|--|

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

Advertising Expense  
Accounting/Banking  
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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 2/4 Rpt: 19/21 | <b>2</b> FILER NAME<br>Brazoria County Democratic Party (CEC) | <b>3</b> Filer ID (Ethics Commission Filers)<br>00017074 |
|--|---|--|

|                             |                                     |
|-----------------------------|-------------------------------------|
| <b>4</b> Date<br>10/21/2024 | <b>5</b> Payee name<br>MAILCHIP.COM |
|-----------------------------|-------------------------------------|

|                                 |  |
|---------------------------------|--|
| <b>6</b> Amount (\$)<br>\$57.56 | <b>7</b> Payee address; City; State; Zip Code<br>675 PONCE DE LEON AVE NE<br>SUITE 5000<br>ATLANTA, GA 30308 |
|---------------------------------|--|

|                                 |   |   |
|---------------------------------|---|---|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>WEBSITE |
|---------------------------------|---|---|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

|                    |                               |
|--------------------|-------------------------------|
| Date<br>10/10/2024 | Payee name<br>OUTREACH CIRCLE |
|--------------------|-------------------------------|

|                         |   |
|-------------------------|---|
| Amount (\$)<br>\$450.00 | Payee address; City; State; Zip Code<br>444 WEST OCEAN<br>SUITE 800<br>LONG BEACH, CA 90802 |
|-------------------------|---|

|                               |   |   |
|-------------------------------|---|---|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>TEXTING |
|-------------------------------|---|---|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|                    |   |
|--------------------|---|
| Date<br>10/07/2024 | Payee name<br>RENTERS WAREHOUSE HOUSTON |
|--------------------|---|

|                           |  |
|---------------------------|--|
| Amount (\$)<br>\$2,710.00 | Payee address; City; State; Zip Code<br>11800 MAGNOLIA PARKWAY<br><br>MANVEL, TX 77578 |
|---------------------------|--|

|                               |   |   |
|-------------------------------|---|---|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>OFFICE RENT |
|-------------------------------|---|---|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|  |  |
|--|--|
|  |  |
|--|--|

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

|          |   |  |   |               |   |
|----------|---|--|---|---------------|---|
| <b>1</b> | Total pages Schedule F1:<br>Sch: 3/4 Rpt: 20/21 | <b>2</b>   | FILER NAME<br>Brazoria County Democratic Party (CEC)  | <b>3</b>      | Filer ID (Ethics Commission Filers)<br>00017074 |
| <b>4</b> | Date<br>10/01/2024                              | <b>5</b>   | Payee name<br>SUBWAY  |               |   |
| <b>6</b> | Amount (\$)<br>\$44.91                          | <b>7</b>   | Payee address; City; State; Zip Code<br>11037 BROADWAY STREET<br>#113<br>PEARLAND, TX 77584   |               |   |
| <b>8</b> | <b>PURPOSE OF EXPENDITURE</b>                   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense       | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>FOOD FOR DEBATE |               |   |
| <b>9</b> |   | Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                     | Candidate/Officeholder name   | Office sought | Office held                                     |
|          | Date<br>10/08/2024                              |  | Payee name<br>TGM DIGITAL MEDIA   |               |   |
|          | Amount (\$)<br>\$1,840.25                       |  | Payee address; City; State; Zip Code<br>13910 MURPHY ROAD<br><br>STAFORD, TX 77477  |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>MAILERS         |               |   |
|          |   | Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                     | Candidate/Officeholder name   | Office sought | Office held                                     |
|          | Date<br>10/12/2024                              |  | Payee name<br>TGM DIGITAL MEDIA   |               |   |
|          | Amount (\$)<br>\$18,431.63                      |  | Payee address; City; State; Zip Code<br>13910 MURPHY ROAD<br><br>STAFORD, TX 77477  |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>                   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>MAILERS         |               |   |
|          |   | Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                     | Candidate/Officeholder name   | Office sought | Office held                                     |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

Advertising Expense  
Accounting/Banking  
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.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 4/4 Rpt: 21/21            | <b>2</b> FILER NAME<br>Brazoria County Democratic Party (CEC)                                  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00017074   |
| <b>4</b> Date<br>10/12/2024   | <b>5</b> Payee name<br>TGM DIGITAL MEDIA   |  |
| <b>6</b> Amount (\$)<br>\$541.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>13910 MURPHY ROAD<br><br>STAFORD, TX 77477    |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br><b>MAILERS</b> |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought                      Office held   |