FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00082084 15 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Ms. Susanna NAME Date Received **ELECTRONICALLY FILED** 10/28/2024 NICKNAME LAST **SUFFIX** Dokupil CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 3262 Westheimer Rd #135 MAILING Amount Receipt # **ADDRESS** Change of Address Houston, TX 77098 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Michael C. NAME NICKNAME LAST **SUFFIX** Massengale STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE: **TREASURER** 3733-1 Westheimer **ADDRESS** #682 (Residence or Business) Houston, TX 77027 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 206-3246 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 09/27/2024 10/26/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/05/2024 χ General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE Court Of Appeals, Justice Place 9 District 1

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

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13 C / OH NAME	Dokupil, Susanna (M	s.)	14 Filer ID (00082084	(Ethics Commis	ssion Filers)				
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder	political contributions accepted or political expenditu These expenditures may have been made without t d officeholders are required to report this information	the candidate's or office	eholder's knowl	ledge or				
Additional Pages	COMMITTEE TYPE								
	GENERAL	GENERAL COMMITTEE ADDRESS							
	SPECIFIC								
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS						
46 CONTRIBUTION	1 TOTAL UNITED	TIZED DOLLTICAL CONTRIBUTION CONTRIBUTION	LDI EDOEC LOANS						
16 CONTRIBUTION TOTALS		IIZED POLITICAL CONTRIBUTIONS(OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$	0.00				
		TICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$	7,354.45				
EXPENDITURE TOTALS	EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES								
	4. TOTAL POLIT	ICAL EXPENDITURES		\$	20,662.00				
CONTRIBUTION BALANCE	5. TOTAL POLITION REPORTING PL	CAL CONTRIBUTIONS MAINTAINED AS OF THE LA	AST DAY OF THE	\$	1,611.08				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCI OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS RTING PERIOD	OF THE LAST DAY	\$	0.00				
17 AFFIDAVIT									
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.							
		Ms. S	Susanna Dokupil						
		Signature of	Candidate or Officehol	der					
AFFIX NOT	TARY STAMP / SEAL AE	OVE							
Sworn to and subsc	cribed before me, by the s	said	, this the		day				
of	, 20, to 0	ertify which, witness my hand and seal of office.							
Signature of offic	er administering oath	Printed name of officer administering oath	Title of officer	r administering	oath				

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

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					9 01 13
18 F	LER NAM	1E	19 Filer ID	(Ethi	ics Commission Filers)
D	okupil, S				
	CHEDUL		SUBTOTAL AMOUNT		
N	AME OF	SCHEDULE			SUBTOTAL AIVIOUNT
1.	X	\$	5,349.20		
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	2,005.25
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$	18,442.54
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	2,219.46
10). <u> </u>	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
1:	L. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
1:	2.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 1/5 Rpt: 4/15
2	FILER NAME Dokupil, Sus	sanna (Ms.)			3	Filer ID (Ethics Commission Filers) 00082084
4	10/24/2024 Baly, Jacquie 6 Contributor address; City; State; Zip Code					Amount of Contribution (\$) \$260.25
_		Houston, TX 77002		9 Contributor's Job Title		
8		Principal Occupation				
_	consultant			Founder		(1)
10	Baly Projects	employer/law firm s		11 Law firm of contributor's sp	oous	se (If any)
12		s a child, law firm of parent(s) (i	f anv)			
	n/a	, , , , , , , , , , , , , , , , , , , ,	, ,	n/a		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Т	Amount of Contribution (\$)
	10/24/2024 Belton, Tim Contributor address; City; State; Zip Code					\$100.00
	Cantuila staula I	Houston, TX 77401		Contributorio Joh Title		
	executive	Principal Occupation		Contributor's Job Title Chairman/CEO		
_		employer/law firm		Law firm of contributor's sp	20116	co (if any)
	ZeoGas LLC			n/a	Jour	se (ii diiy)
		s a child, law firm of parent(s) (i	f anv)			
	n/a	, , , , , , , , , , , , , , , , , , , ,	,,	n/a		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	10/26/2024	Bruno, Nicholas Contributor address; City;	State; Zip Code			\$104.10
		Houston, TX 77007				
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	attorney			attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Beck Redde	n	n/a			
	If contributor is	s a child, law firm of parent(s) (i	f any)	•		
	n/a			n/a		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains ho	ow to complete this f	form.	1	otal pages Schedule A(J)1 ch: 2/5 Rpt: 5/15	:
2	FILER NAME				3 Fi	er ID (Ethics Commission	on Filers)
	Dokupil, Sus	sanna (Ms.)			00	0082084	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Ar	mount of Contribution (\$)	
	09/30/2024	Dorfman, Grant (The Ho	onorable)				\$500.00
	6 Contributor address; City; State; Zip Code						
		Bellaire, TX 77401					
8	Contributor's	Principal Occupation	9 Contributor's Job Title				
	attorney			judge			
10		employer/law firm		11 Law firm of contributor's s	pouse (if any)	
	State of Tex	as		n/a			
12	2 If contributor i	s a child, law firm of parent(s) (i	f any)				
	n/a			n/a			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Ar	mount of Contribution (\$)	
	10/23/2024	Gregory, Roger					\$208.20
		Contributor address; City;	State; Zip Code		"		
		Houston, TX 77055					
	Contributor's	Principal Occupation		Contributor's Job Title	•		
	CEO			CEO			
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)	
	Serac Capita	al Partners		n/a			
	If contributor i	s a child, law firm of parent(s) (i	f any)	•			
	n/a			n/a			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Ar	nount of Contribution (\$)	
	10/14/2024	Hage, Chris	_				\$104.10
		Contributor address; City;	State; Zip Code				
		San Jose, CA 95123					
	Contributor's	Principal Occupation		Contributor's Job Title			
	attorney			District Attorney			
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)	
	City of San I			n/a			
	If contributor i	s a child, law firm of parent(s) (i	f any)				
	n/a			n/a			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A	A(J)1	
	The Instru	ction Guide explains ho	ow to complete this t	form.		ges Schedule A(J)1: 5 Rpt: 6/15		
2	FILER NAME				3 Filer ID	(Ethics Commissio	n Filers)	
	Dokupil, Sus	sanna (Ms.)			0008208	84		
4	Date 10/19/2024	5 Full name of contributor				of Contribution (\$)	\$104.10	
		Houston, TX 77027						
8	Contributor's	Principal Occupation	9 Contributor's Job Title					
	retired			retired				
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)			
	n/a			n/a				
12	! If contributor i	s a child, law firm of parent(s) (f any)					
	n/a			n/a				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount o	of Contribution (\$)		
	10/14/2024	Powers, Jason					\$500.00	
		Contributor address; City;	State; Zip Code		"			
		Houston, TX 77002						
	Contributor's	Principal Occupation		Contributor's Job Title				
	attorney			Partner				
	Contributor's	employer/law firm		Law firm of contributor's spouse (if any)				
	Vinson & Ell	kins		n/a				
	If contributor i	s a child, law firm of parent(s) (f any)					
	n/a			n/a				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount o	of Contribution (\$)		
	10/21/2024	Rodi, David					\$104.10	
		Contributor address; City;	State; Zip Code					
		Houston, TX 77025						
	Contributor's	Principal Occupation		Contributor's Job Title	1			
	attorney			Chief Global Antitrust (Counsel			
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)			
	Shell			n/a				
	If contributor i	s a child, law firm of parent(s) (f any)					
	n/a			n/a				

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A(J)1	
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 4/5 Rpt: 7/15
2	FILER NAME Dokupil, Sus			3 Filer ID (Ethics Commission Filers) 00082084
4	Date 10/17/2024	 5 Full name of contributor out-of-state PAC (ID#: Sawyer, David 6 Contributor address; City; State; Zip Code Houston, TX 77057)	7 Amount of Contribution (\$) \$104.10
8	Contributor's I	Principal Occupation	9 Contributor's Job Title	
	investor		COO & Managing Partn	er
10	Contributor's Co	employer/law firm	11 Law firm of contributor's sp	ouse (if any)
12		s a child, law firm of parent(s) (if any)	11/α	
12	n/a	s a clinu, law litti of paretil(s) (ii aliy)	n/a	
	Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/06/2024	Strachman, Danielle Contributor address; City; State; Zip Code Oakland, CA 94606		\$260.25
	Contributor's I	I Principal Occupation	Contributor's Job Title	
	investor		Founder/General Partne	er
	Contributor's	employer/law firm	Law firm of contributor's sp	ouse (if any)
	1517 Fund		n/a	
	If contributor i	s a child, law firm of parent(s) (if any)		
	n/a		n/a	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/26/2024 Texas Asian Republican Club Contributor address; City; State; Zip Code Houston, TX 77215			\$500.00
	Contributor's I	Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's sp	ouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL CON	SCHEDULE A(J)1	
	The Instru	ction Guide explains how to co	1 Total pages Schedule A(J)1: Sch: 5/5 Rpt: 8/15	
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Dokupil, Sus			00082084
4	Date	<u> </u>	-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	10/08/2024	Texas Farm Bureau AGFUND		\$1,000.00
		6 Contributor address; City; State; Zip Waco, TX 76702-2689	o Code	
_	Cambrilantania		O Constributorio lob Titlo	
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
10	Contributor's	employer/law firm	11 Law firm of contributor's s	spouse (if any)
12	If contributor i	s a child, law firm of parent(s) (if any)	I	
	Date	Full name of contributor out	-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/07/2024	Wright Close & Barger LLP		\$1,500.00
		Contributor address; City; State; Zip) Code	···· <mark>·</mark>
		Houston, TX 77056		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's s	spouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)		

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 9/15 3 Filer ID (Ethics Commission Filers) FILER NAME Dokupil, Susanna (Ms.) 00082084 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 10/11/2024 Texas Farm Bureau AGFUND \$5.25 website endorsement 7 Contributor address; City; State; Zip Code Waco, TX 76702-2689 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Date Full name of contributor Amount of out-of-state PAC (ID#: contribution (\$) description 10/20/2024 Webman, Aaron \$2,000.00 I video production Contributor address; City; State; Zip Code Austin, TX 78704 Check if travel outside of Texas. Complete Schedule T. (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) President Pauper Prince Entertainment, LLC Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) n/a If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) n/a

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:								
	Sch: 1/5 Rpt: 10/15	Dokupil, Susanna (Ms.) 00082084							
4	Date	Payee name							
	10/26/2024	Fort Bend County Republican Party							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$10,000.00	PO Box 461							
		Sugar Land, TX 77487-0461							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.							
	EXPENDITORE	Candidate/Officeholder/Political Committee							
		Contribution to Joint Judicial Campaign							
_									
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
	Date	Payee name							
	10/25/2024	Pink Cilantro LLC							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$8,350.00	11333 Chimney Rock Road							
		Houston, TX 77035							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.							
		Check if Austin, TX, officeholder living expense							
		retainer, digital ad management, social media marketing, website hosting							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI								
	Date	Power name							
	09/30/2024	Payee name WinRed Technical Services LLC							
	Amount (\$) \$19.70	Payee address; City; State; Zip Code 1776 Wilson Blvd							
	Ф19.70								
		Suite 530							
		Arlington, VA 22219							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
		donation processing fee							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 2/5 Rpt: 11/15	Dokupil, Susanna (Ms.) 00082084
4	Date	5 Payee name
	10/05/2024	WinRed Technical Services LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.25	1776 Wilson Blvd
		Suite 530
		Arlington, VA 22219
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense donation processing fee
		donation processing ree
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Davida marea
	10/14/2024	Payee name WinRed Technical Services LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.70	1776 Wilson Blvd
		Suite 530
		Arlington, VA 22219
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		donation processing fees
		assumes, processing read
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiantare to benefit of or	
	Date	Payee name
	10/14/2024	WinRed Technical Services LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.10	1776 Wilson Blvd
		Suite 530
		Arlington, VA 22219
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		donation processing fees
	Commission ONU Wife allows	Condidate/Officeholder name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
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)

Ci	redit Card Payment		The Instruction Guide explains how to co	omple	ete this form.	
1 Tot	tal pages Schedule F1:	2	FILER NAME		3 Filer ID	(Ethics Commission Filers)
S	sch: 3/5 Rpt: 12/15		Dokupil, Susanna (Ms.)		00082084	
4 Da	te	5	Payee name		•	
10	/17/2024		WinRed Technical Services LLC			
6 Am	nount (\$)	7	Payee address; City; State; Zip Co	ode		
	\$4.10		1776 Wilson Blvd			
			Suite 530			
			Arlington, VA 22219			
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description	
E	OF XPENDITURE		Fees		Check if travel outside of Texas. Comp Check if Austin, TX, officeholder living	
					donation processing fees	expense
					dendation proceeding rece	
	mplete ONLY if direct		Candidate/Officeholder name Office sou	ught	Office he	ld
exp	penditure to benefit C/C	Н				
Da	te	T	Payee name			
10	/18/2024		WinRed Technical Services LLC			
Am	nount (\$)		Payee address; City; State; Zip Co	ode		
	\$4.10		1776 Wilson Blvd			
			Suite 530			
			Arlington, VA 22219			
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description	
E	OF XPENDITURE		Fees		Check if travel outside of Texas. Comp	
					Check if Austin, TX, officeholder living donation processing fees	expense
					donation processing rees	
Co	mplete ONLY if direct		Candidate/Officeholder name Office so	<u>l</u> ught	Office he	ld
	penditure to benefit C/C	Н				
Da	te		Payee name			
10	/21/2024		WinRed Technical Services LLC			
Am	nount (\$)		Payee address; City; State; Zip Co	ode		
	\$4.10		1776 Wilson Blvd			
			Suite 530			
			Arlington, VA 22219			
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description	
E	OF XPENDITURE		Fees		Check if travel outside of Texas. Comp	
					Check if Austin, TX, officeholder living donation processing fees	expense
					donation processing rees	
Co	mplete ONLY if direct	Т,	Candidate/Officeholder name Office sou	<u> </u>	Office he	ld
	penditure to benefit C/C	Н		-		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/5 Rpt: 13/15	Dokupil, Susanna (Ms.) 00082084
4	Date	5 Payee name
	10/23/2024	WinRed Technical Services LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$8.20	1776 Wilson Blvd
		Suite 530
	l	Arlington, VA 22219
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	<u> </u>	Check if Austin, TX, officeholder living expense donation processing fees
	l	donation processing rees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	10/24/2024	WinRed Technical Services LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.25	1776 Wilson Blvd
	,	Suite 530
		Arlington, VA 22219
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
	!	Donation processing fees
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experiantic to benefit 5/5/	·
	Date	Payee name
	10/24/2024	WinRed Technical Services LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$3.94	1776 Wilson Blvd
		Suite 530
		Arlington, VA 22219
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense donation processing fees
	l	donation processing rees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - al Co	mmittee	Food/Beverage Expense Gift/Awards/Memorials Expens Legal Services	se	Polling Exp Printing Exp	ense pense	Contract Labor		Travel in District Travel Out of Dis	trict category not listed above)	
	Credit Card Payment			The Instruction Guide ex	xplains h	ow to con	nple	te this form.				
1	Total pages Schedule F1: Sch: 5/5 Rpt: 14/15	2		ME Susanna (Ms.)					3	Filer ID 00082084	(Ethics Commission Filers	s)
4	Date	5	Payee nam	ne					<u> </u>			
	10/26/2024			echnical Services LLC	:							
6	Amount (\$)	7	Payee addr	ress; City;	State:	Zip Cod	de					
	\$4.10		1776 Wils			•						
			Suite 530									
			Arlington,	VA 22219								
8	PURPOSE	(a			-f 4l-:l	4.4-2	(b)	Description				
ľ	OF	```	Fees	(See Categories listed at the top of	of this sched	dule)	(2)		outsi	de of Texas. Com	olete Schedule T.	
	EXPENDITURE		1 000					Check if Austin	ı, TX,	officeholder living	expense	
								donation pro	ces	sing fees		
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/O	fficeholder name	Of	ffice soug	ght			Office he	eld	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Gift/Awards/Memorials Expense Print	g Expense Travel in District gg Expense Travel Out of District es/Wages/Contract Labor OTHER (enter a category not listed o complete this form.	above)
1	Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commiss	sion Filers)
	Sch: 1/1 Rpt: 15/15	Dokupil, Susanna (Ms.)	00082084	
4	Date	5 Payee name	<u> </u>	
	10/03/2024	AlphaGraphics		
6	Amount (\$)	7 Payee address; City; State; Zip	Code	
	\$1,066.74	5633 Richmond		
	Reimbursement from political contributions intended	#100-A Houston, TX 77057		
_			(A) Description Colorador provide at Toronto	-lata Cabadala T
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Comp	
	EXPENDITURE	Advertising Expense	pushcards	
			pusitedius	
9	Complete ONLY if direct	Candidate/Officeholder name	Office sought Office held	
<u></u>	expenditure to benefit C/OH	Cardidate/Officeriolder Harrie	Office sought Office field	
	Date	Payee name		
	10/08/2024	AlphaGraphics		
	Amount (\$)	Payee address; City; State; Zip	Code	·
	\$1,066.74	5633 Richmond		
	Reimbursement from	#100-A		
	X political contributions intended	Houston, TX 77057		
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Comp	olete Schedule T.
	OF EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living of	expense
	EXPENDITORE		pushcards	
	•	Candidate/Officeholder name	Office sought Office held	
	expenditure to benefit C/OH			
	Date	Payee name		
	10/18/2024	AlphaGraphics		
	Amount (\$)	Payee address; City; State; Zip	Code	
	\$85.98	5633 Richmond		
	Reimbursement from political contributions	#100-A		
	intended	Houston, TX 77057		
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Comp	
	OF EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living	expense
			campaign stickers	
		Candidate/Officeholder name	Office sought Office held	
	avnanditura to hanofit			
	expenditure to benefit C/OH			