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) 00081980 24 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Jennifer V. NAME Date Received **ELECTRONICALLY FILED** 10/28/2024 NICKNAME LAST **SUFFIX** Jenn Caughey CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Harvey NAME NICKNAME LAST **SUFFIX** Brown **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 659-5200 **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 2 District 1

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

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13 C / OH NAME	Caughey, Jennifer V.	(The Honorable)	14 Filer ID (00081980	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendi These expenditures may have been made withou d officeholders are required to report this informati	t the candidate's or office	eholder's knowledge or
X Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL	Stop Houston Murders PAC		
		COMMITTEE ADDRESS		
	SPECIFIC	P. O. Box 20484		
		Houston, TX 77225		
		COMMITTEE CAMPAIGN TREASURER NAME		
		Cook, Chuck		
		COMMITTEE CAMPAIGN TREASURER ADDRE	ESS	
		P. O. Box 20484		
		Houston, TX 77225		
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OTHER THATES OF LOANS, OR CONTRIBUTIONS MADE EL		\$ 0.00
		ICAL CONTRIBUTIONS		\$ 16,750.00
EXPENDITURE	+	PLEDGES, LOANS, OR GUARANTEES OF LOA IZED POLITICAL EXPENDITURES	NS)	
TOTALS				\$ 0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 130,068.54
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 3,763.27
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A TING PERIOD	S OF THE LAST DAY	\$ 25,000.00
17 AFFIDAVIT		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code.	all information required to	
		The Honor	able Jennifer V. Caug	hey
		Signature	of Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of offi	cer administering oath	Printed name of officer administering oath	Title of officer	administering oath
	-	-		

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM JC/OH ADDENDUM

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				1 age 6 6.21
C / OH NAME	Caughey, Jennifer V.	(The Honorable)	Filer ID 00081980	(Ethics Commission Filers)
17 NOTICE FROM POLITICAL COMMITTEE(S)	expenditures may have I	of political expenditures by political committees to speen made without the candidate's or officeholder's do not to report this information only if they receive notice.	knowledge or co	onsent. Candidates and
` ,	COMMITTEE TYPE	COMMITTEE NAME		
	l	Republican State Leadership Committee – J	ludicial Fairness	s Initiative
	X GENERAL	COMMITTEE ADDRESS		
	_	1201 F Street NW, Suite 675		
	SPECIFIC	1201 1 Street IVVV, Suite 073		
		Washington, DC 20004		
		COMMITTEE CAMPAIGN TREASURER NAME		
		Hobbs, Cabell		
		COMMITTEE CAMPAIGN TREASURER ADDRE	ss	
		1201 F Street NW, Suite 675		
		Washington, DC 20004		

SUBTOTALS - JC/OH

FORM JC/OH **COVER SHEET PG 3**

					4 of 24
18 FILER Caugl		19 Filer ID 00081980	(Ethi	ics Commission Filers)	
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	16,750.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	117,944.70
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	12,123.84
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	5.15

	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: 1/6 Rpt: 5/24
2	FILER NAME Caughey, Je	ennifer V. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081980
4	Date 10/16/2024	5 Full name of contributor Behncke, Matt6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$1,000.00
		Houston, TX 77019				
8		Principal Occupation		9 Contributor's Job Title		
10	Lawyer	employer/law firm		Lawyer	2011	co (if any)
10	Susman Go			11 Law firm of contributor's sp	Jous	se (II ally)
12		s a child, law firm of parent(s) (i	any)	<u> </u>		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	10/25/2024	Caughey, Tom Contributor address; City; Davidson, NC 28036	State; Zip Code			\$1,000.00
	Contributor's I	l.		Contributor's Job Title	<u> </u>	
	Consultant					
				Law firm of contributor's sp	oous	se (if any)
	If contributor i	s a child, law firm of parent(s) (i	any)	l		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	10/23/2024					\$1,000.00
		Houston, TX 77022				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's employer/law firm Law firm of contributor's s			oous	se (if any)	
	Reynolds Fr					
	If contributor i	s a child, law firm of parent(s) (i	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 2/6 Rpt: 6/24
2	FILER NAME Caughey, Je	ennifer V. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081980
4	Date 09/30/2024	5 Full name of contributor Keller, Scott6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$500.00
		McLean, VA 22101				
8		Principal Occupation		9 Contributor's Job Title		
10	Lawyer	and a conflored finance		Lawyer		on (if any)
10		employer/law firm ller Cohn LLP		11 Law firm of contributor's sp	ous	se (II any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)	I .		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	10/10/2024	Mackie, Elizabeth Contributor address; City; Houston, TX 77027	State; Zip Code			\$100.00
	Contributor's I	ļ		Contributor's Job Title		
	Contributor's Principal Occupation Contributor's Job Title Homemaker Homemaker					
-		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Homemaker					
	If contributor is	s a child, law firm of parent(s) (i	f any)	•		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	10/17/2024	Marshall, Meredith				\$5,000.00
		Contributor address; City; Houston, TX 77019				
	Contributor's F	Principal Occupation		Contributor's Job Title	•	
	Homemaker Homemaker					
	Contributor's employer/law firm Law firm of contributor's s				oous	se (if any)
	Homemaker					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 3/6 Rpt: 7/24
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Caughey, Je	ennifer V. (The Honorable)			00081980
4	Date 10/09/2024	5 Full name of contributorOlson & Olson6 Contributor address; City; S	out-of-state PAC (ID#:_		7 Amount of Contribution (\$) \$250.00
		Houston, TX 77019			
8	Contributor's	I Principal Occupation		9 Contributor's Job Title	
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)
12	If contributor i	s a child, law firm of parent(s) (if	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:		Amount of Contribution (\$)
	10/02/2024	Republican Party of Texa	-	J	\$2,500.00
		Contributor address; City; S			
		Austin, TX 78701			
	Contributor's	Principal Occupation		Contributor's Job Title	
Contributor's employer/law firm				Law firm of contributor's s	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/21/2024	Shapiro, Gordon	_		\$250.00
		Contributor address; City; S Dallas, TX 75201	State; Zip Code		
Contributor's Principal Occupation		Contributor's Job Title	<u> </u>		
Attorney				Attorney	
Contributor's employer/law firm				Law firm of contributor's s	oouse (if any)
Jackson Walker LLP					
	If contributor i	s a child, law firm of parent(s) (if	any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 4/6 Rpt: 8/24
2	FILER NAME Caughey, Je	ennifer V. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081980
4	Date 10/24/2024	5 Full name of contributorSmith, Nathan6 Contributor address; City;	out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$300.00
		Houston, TX 77077				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Contributor's e	employer/law firm izzell LLP		11 Law firm of contributor's sp	ous	se (if any)
12		s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	10/20/2024	Stephens, Daniel Contributor address; City;	State; Zip Code		•	\$500.00
		Washington, DC 20016				
	Contributor's Principal Occupation Contributor's Job Title					
	Lawyer			Lawyer		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	<u> </u>		
		T			_	
	Date 10/20/2024	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$) \$100.00
	10/20/2024	Tang, James Contributor address; City;	State; Zip Code			\$100.00
	0 + - 1 - 1 - 1	Houston, TX 77082		Contaile de de Tale Tide		
	Contributor's Principal Occupation Contributor's Job Title Retired Retired					
	Contributor's employer/law firm Law firm of contributor's s				ous	se (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL CON	TRIBUTIC	ONS			SCHEDULE	A(J)1
	The Instru	ction Guide explains how to co	omplete this fo	orm.	1		es Schedule A(J)1 Rpt: 9/24	L:
2	FILER NAME				3	Filer ID	(Ethics Commissi	on Filers)
	Caughey, Je	nnifer V. (The Honorable)				0008198	30	
4	Date	5 Full name of contributor our	t-of-state PAC (ID#:_)	7	Amount o	f Contribution (\$)	
	10/20/2024	Texas Asian Republican Club P	AC					\$500.00
		6 Contributor address; City; State; ZipHouston, TX 77215	o Code					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title				
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)		
12	If contributor is	s a child, law firm of parent(s) (if any)						
	Date	Full name of contributor out	t-of-state PAC (ID#:_)		Amount o	f Contribution (\$)	
	10/09/2024	Texas Farm Bureau Agfund						\$1,000.00
		Contributor address; City; State; Zip	Code					
		Waco, TX 76702						
	Contributor's I	Principal Occupation		Contributor's Job Title				
Contributor's employer/law firm			Law firm of contributor's sp	oous	se (if any)			
	If contributor is	s a child, law firm of parent(s) (if any)						
	Date	Full name of contributor our	t-of-state PAC (ID#:_)		Amount o	f Contribution (\$)	
	10/04/2024	The Lanier Law Firm						\$750.00
		Contributor address; City; State; Zip Houston, TX 77064	o Code					
_	Contributor's	Principal Occupation		Contributor's Job Title				
	Continuators	-ппстраг Оссираноп		Continuator's 300 Title				
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)		
	If contributor is	s a child, law firm of parent(s) (if any)						

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE	A(J)1
	The Instruction Guide explains how to complete this form.	1		es Schedule A(J)1 Rpt: 10/24	L:
2	FILER NAME Caughey, Jennifer V. (The Honorable)	3	Filer ID ((Ethics Commissi)	on Filers)
4	Date 10/21/2024 5 Full name of contributor out-of-state PAC (ID#:) Vosko, Beverly 6 Contributor address; City; State; Zip Code	7	Amount of	Contribution (\$)	\$2,000.00
	Houston, TX 77056				
8	Contributor's Principal Occupation Interior Design 9 Contributor's Job Title Interior Design				
10	Contributor's employer/law firm 11 Law firm of contributor's sp	oous	se (if any)		
12	Self If contributor is a child, law firm of parent(s) (if any)				
12	il continuator is a clinia, law infin or parenias) (ii any)				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Pol Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide	Office Ov Polling E pense Printing E Salaries/	xpense Nages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F	.: 2 FILER NA	ME			3 Filer ID (Ethics Commission Filers)
Sch: 1/11 Rpt: 11/24	Caughey	, Jennifer V. (The Ho	norable)		00081980
4 Date	5 Payee nar	me			
10/26/2024	Anedot				
6 Amount (\$) \$192.7		•	State; Zip Co	ode	
8 PURPOSE OF EXPENDITURE	(a) Category	(See Categories listed at the to	op of this schedule)	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense nsaction Fees During Reporting Period
Complete <u>ONLY</u> if direct expenditure to benefit C.		Officeholder name	Office sou	ught	Office held
Date	Payee nar	ne			
10/24/2024	Cooper, I	=lorida			
Amount (\$) \$475.0	Payee add	dress; City; kman Drive #372	State; Zip Co	ode	
		TX 78723		Γ., .	
PURPOSE OF EXPENDITURE		(See Categories listed at the tr Wages/Contract Labo		l <u>–</u>	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C.		Officeholder name	Office sou	ught	Office held
Date	Payee nar				
10/10/2024	Davis, Ca	aitlyn			
Amount (\$) \$115.0	Payee add	dress; City; nblewood Drive	State; Zip Co	ode	
	Beach Ci	ty, TX 77523			
PURPOSE OF EXPENDITURE	1	(See Categories listed at the to Wages/Contract Labo		ı <u></u>	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit Co		Officeholder name	Office sou	ught	Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

	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: 2/11 Rpt: 12/24	Caughey, Jennifer V. (The Honorable) 00081980
4	Date	5 Payee name
	10/15/2024	Davis, Caitlyn
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$115.00	8735 Tumblewood Drive
		Beach City, TX 77523
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Contract Labor
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	'	
	Date	Payee name
	10/11/2024	Dibrell & Associates
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	4203 Glade Shadow Court
		Katy, TX 77494
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Video Production
		Video i reddelen
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	10/15/2024	Dibrell & Associates
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,000.00	4203 Glade Shadow Court
	72,000	
		Katy, TX 77494
	PURPOSE	•
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Digital Advertising
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientale to beliefft G/OI	·

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_		
1	Total pages Schedule F1:	
	Sch: 3/11 Rpt: 13/24	Caughey, Jennifer V. (The Honorable) 00081980
4	Date	5 Payee name
	10/22/2024	Dibrell & Associates
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	4203 Glade Shadow Court
		Katy, TX 77494
	PURPOSE	
8	OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Digital Advertising
		2 igitat / tavortioning
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
	Date	Payee name
	10/05/2024	Fort Bend Republican Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	14019 SW Freeway #340
		Sugar Land, TX 77478
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder (Political Committee) Check if Austin, TX, officeholder living expense
		Court of Appeals Fund Donation
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· ·
⊨	Date	Payoo namo
	10/17/2024	Payee name Fort Rond Ropublican Party
		Fort Bend Republican Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$7,000.00	14019 SW Freeway #340
		Sugar Land, TX 77478
	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.
	LAFLINDITURE	Candidate/Officeholder/Political Committee
		Court of Appeals Fund Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment		ee Le	gal Services			/ages	s/Contract Labor		OTHER (enter	a category not listed above)	
	ordan dara r aymoni	T	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F1:	2 FILE	ER NAME						3	Filer ID	(Ethics Commission File	ers)
	Sch: 4/11 Rpt: 14/24	Cau	ughey, Jen	nifer V. (The	Honorab	le)				00081980		
4	Date	5 Pay	ee name									
	10/17/2024	Fro	st Bank									
6	Amount (\$)	7 Pay	ee address	; City;	Sta	ate; Zip Co	de					
	\$30.00	100) West Hoเ	uston Street								
		Sar	n Antonio,	TX 78205								
8	PURPOSE			Categories listed at	the ten of this	, aabadula)	(b)	Description				
	OF		counting/Ba		trie top or triis	scriedule)	()	_ :	outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE	/ 100	Journal 1g/ Di	arming				Check if Austin,	, TX,	officeholder livin	g expense	
								Wire Transfer	r Fe	ee		
9	Complete ONLY if direct		lidate/Office	holder name		Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	H										
	Date	Pay	/ee name									
	10/20/2024	Gal	blines, Joli	na								
	Amount (\$)	Pay	ee address	; City;	Sta	ate; Zip Co	de					
	\$300.00	82 1	Hontanosa	as Street								
		Tag	gbilaran Bo	ohol 6300 Ph	ilippines							
	PURPOSE	(a) Cate	egory (See (Categories listed at	the ton of this	: schedule)	(b)	Description				
	OF	l		es/Contract L		(Soffeddie)			outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE							Check if Austin,	, TX,	officeholder livin	g expense	
								Contract Laborate	or			
	Complete ONLY if direct expenditure to benefit C/OH		lidate/Office	holder name		Office sou	ght			Office h	eld	
	experialiture to beliefit C/OI	1										
	Date	Pay	ee name									
	10/02/2024	Hal	II, Terrance	9								
	Amount (\$)	Pay	ee address	; City;	Sta	ate; Zip Co	de					
	\$650.00	793	37 Count S	it								
		Ηοι	uston, TX	77028								
	PURPOSE	(a) Cate	egory (See (Categories listed at	the top of this	schedule)	(b)	Description				
	OF EXPENDITURE			es/Contract L		,			outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITORE							_		officeholder livin	g expense	
								Contract Labo	or			
	Complete ONLY if direct expenditure to benefit C/OH		lidate/Office	holder name		Office sou	ght			Office h	eld	
	oxportantial to sometime of or i											

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/11 Rpt: 15/24	Caughey, Jennifer V. (The Honorable) 00081980
4	Date	5 Payee name
	10/09/2024	Hall, Terrance
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$200.00	7937 Count St
		Houston, TX 77028
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Contract Labor
		Contract Labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
F	Date	Payee name
	09/27/2024	Levine, Burt
H	Amount (\$)	Payee address; City; State; Zip Code
	\$350.00	9600 Glenfield Court #148
		Houston, TX 77096
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Contract Labor
		35/18/400 24307
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	10/02/2024	Levine, Burt
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	9600 Glenfield Court #148
		Houston, TX 77096
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign Sign Placement
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

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

	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: 6/11 Rpt: 16/24	Caughey, Jennifer V. (The Honorable) 00081980
4	Date	5 Payee name
	10/07/2024	Levine, Burt
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$293.00	9600 Glenfield Court #148
		Houston, TX 77096
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Sign Material Equipment
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/17/2024	Levine, Burt
	Amount (\$)	Payee address; City; State; Zip Code
	\$350.00	9600 Glenfield Court #148
		Houston, TX 77096
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Contract Labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-
	Date	Payee name
	09/30/2024	NBD Graphics
	Amount (\$)	Payee address; City; State; Zip Code
	\$514.00	917 S Mason Rd
		Katy, TX 77450
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense
		Check if Austin, TX, officeholder living expense Campaign Signs
		Campaign Signs
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	<u> </u>
L	Sch: 7/11 Rpt: 17/24	
4	Date	5 Payee name
	10/04/2024	Pleasant Hill Baptist Church
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	5000 Cruse Rd
		Houston, TX 77016
Ļ	DUDDOCE	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Print Advertising
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
L	10/04/2024	RelyReach
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,600.00	1000 Main St Ste 2300G
		Houston, TX 77002
_	PURPOSE	
	OF	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Peer to Peer Texting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Data	Davies same
	Date	Payee name Shekari Enterprises INC
	10/18/2024	Shekari Enterprises, INC
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	3842 Overbrook Lane
		Houston, TX 77027
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Digital Advertising
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 8/11 Rpt: 18/24	Caughey, Jennifer V. (The Honorable) 00081980
4	Date	5 Payee name
_	10/21/2024	Shekari Enterprises, INC
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 3842 Overbrook Lane
	Ψ1,000.00	3042 OVERBIOOK Ettile
		Houston, TX 77027
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense Digital Advertising
		Digital / lavertising
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-
	Date	Payee name
	10/24/2024	Shekari Enterprises, INC
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,750.00	3842 Overbrook Lane
		Houston, TX 77027
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Digital Advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	10/05/2024	Texas Conservative Review
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	1533 W Alabama St
		Houston, TX 77006
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Joint Campaign Print Advertising
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/11 Rpt: 19/24	Caughey, Jennifer V. (The Honorable) 00081980
4	Date	5 Payee name
	09/30/2024	Texas Hometown Strategies
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$410.00	PO Box 518
		Leander, TX 78646
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense
		Campaign Literature Distribution
_	Complete ONLY if direct	Condidate/Office helds no years Office accords
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	Data	
	Date	Payee name
	10/02/2024	Texas Hometown Strategies
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	PO Box 518
		Leander, TX 78646
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Compaign Literature Placement
		Campaign Literature Placement
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Davies same
	10/04/2024	Payee name Texas Hometown Strategies
		ē .
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	PO Box 518
		Leander, TX 78646
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Literature Placement
		Sampaign Electature i lacement
	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 Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
┡	Total pages Schedule F1:	<u> </u>
ľ	Sch: 10/11 Rpt: 20/24	Caughey, Jennifer V. (The Honorable)
4	Date	5 Payee name
	10/17/2024	The Dudley Group
6	Amount (\$)	7 Payee address; City; State; Zip Code
ľ	\$65,000.00	815A Brazos St Ste 701
	Ψοσ,σσσ.σσ	010/12/02/00 01/01
		A
L		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Digital Advertising
		Digital Advertising
Ļ	0 1: 0:::::::::::::::::::::::::::::::::	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	10/05/2024	The What's Up Radio Program
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	18715 Tamer View Court
		Tomball, TX 77377
⊢	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Joint Political Advertising
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
┝	Date	Davies name
	09/30/2024	Payee name Versa Creative
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$15,000.00	7600 W Tidwell Rd Suite 810
		Houston, TX 77040
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Digital Advertising
$ldsymbol{f eta}$		
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
L	Superiorder to belieff 6/01	··

SCHEDULE F1

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/Political Commi Credit Card Payment			mmittee	Gift/Awar Legal Sei	verage Expense rds/Memorials Exprvices struction Guide			pense ages/	Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed a	above)
1	Total pages Schedule F1:	2	FII FR NAM	1F		-				3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 11/11 Rpt: 21/24	-			V. (The Ho	norable)					00081980		,
4	Date	5	Payee nam	e									
	10/04/2024		Wooten, P										
6	Amount (\$)	7	Payee addr	ess;	City;	State;	Zip Cod	de					
	\$2,500.00		10680 We	stbrae F	Parkway								
			Haveten 7	FV 7700	1								
8	PURPOSE	(a)	Houston,				10	(h)					
ľ	OF	(۳)	Advertising		ries listed at the t	op of this sche	edule)	(, 		outsi	de of Texas. Comp	olete Schedule T.	
	EXPENDITURE		, avertion i	у шхреп	50			j	Check if Austin	, TX,	officeholder living		
									Print Advertis	sing			
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Of	fficeholde	er name	С	Office soug	jht			Office he	ld	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Office Overnead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
Credit Card Payment	The Instruction Guide explain	s how to complete this form.								
1 Total pages Schedule G:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)							
Sch: 1/2 Rpt: 22/24	Caughey, Jennifer V. (The Honorable	e)	00081980							
4 Date	5 Payee name		I							
10/23/2024	Fort Bend Independent									
6 Amount (\$)	7 Payee address; City; State; Zip Code									
\$750.00	PO Box 623									
Reimbursement from										
X political contributions intended	Sugar Land, TX 77487									
8 PURPOSE	(a) Category (See Categories listed at the top of this s	chedule) (b) Description	Check if travel outside of Texas. Complete Schedule T.							
OF EXPENDITURE	Advertising Expense	L	Check if Austin, TX, officeholder living expense							
		Print Advertising								
Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name	Office sought	Office held							
C/OH										
Data										
Date	Payee name									
10/16/2024	Herald Publishing Company									
Amount (\$)	Payee address; City; State; Zip Code									
\$540.00	3403 Audley Street									
Reimbursement from political contributions										
political contributions intended	Houston, TX 77098									
PURPOSE	Category (See Categories listed at the top of this s	chedule) Description	Check if travel outside of Texas. Complete Schedule T.							
OF EXPENDITURE	Advertising Expense		Check if Austin, TX, officeholder living expense							
EXI ENDITORE		Print Advertising								
	Candidate/Officeholder name	Office sought	Office held							
expenditure to benefit C/OH										
Date	Payee name									
10/22/2024	NBD Graphics									
Amount (\$)	Payee address; City; Stat	te; Zip Code								
\$558.84	917 S Mason Rd									
Reimbursement from										
x political contributions intended	Katy, TX 77450									
PURPOSE	Category (See Categories listed at the top of this s	chedule) Description	Check if travel outside of Texas. Complete Schedule T.							
OF EXPENDITURE	Printing Expense		Check if Austin, TX, officeholder living expense							
D. LIBITORE		Campaign Yard S	Signs							
	Candidate/Officeholder name	Office sought	Office held							
expenditure to benefit C/OH										

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 2/2 Rpt: 23/24 Caughey, Jennifer V. (The Honorable) 00081980 Date Payee name 10/16/2024 Shekari Enterprises, INC Amount (\$) Payee address; City; State; Zip Code \$3,275.00 3842 Overbrook Lane Reimbursement from political contributions Х intended Houston, TX 77027 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Digital Advertising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/17/2024 Versa Creative Amount (\$) Payee address; City; State; Zip Code \$5,000.00 7600 W Tidwell Rd Suite 810 Reimbursement from political contributions Χ Houston, TX 77040 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Digital Advertising Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/22/2024 Versa Creative Payee address; City; State; Zip Code Amount (\$) \$2,000.00 7600 W Tidwell Rd Suite 810 Reimbursement from Χ political contributions intended Houston, TX 77040 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE Digital Advertising** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 24/24 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Caughey, Jennifer V. (The Honorable) 00081980 5 Name of person from whom amount is received 8 Amount (\$) 10/16/2024 \$5.15 Frost Bank 6 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78205 Purpose for which amount is received Check if political contribution returned to filer Interest