JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to c	omplete this form.	1 Filer ID (Ethics Commiss 00082057	ion Filers)	2 Total page:	s filed: 23
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		E USE ONLY
OFFICEHOLDER	The Honorable	Margaret A.				
NAME					Date Received	
					ELECTRON	ICALLY FILED
	NICKNAME	LAST		SUFFIX	10/28/2024	
	Meg	Poissant				
4 CANDIDATE /	ADDRESS / PO BOX;		ΓV·	ZIP CODE	Date Hand-deliver	ed or Date Postmarked
OFFICEHOLDER			,			
MAILING					Receipt #	Amount
ADDRESS	REDACTED PER	254.0313, GOV'T (CODE			
Change of Address					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER	Mr.	Lester				
NAME		Lootor				
	NICKNAME	LAST			SUFFIX	
		Marks				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO	PO BOX PLEASE);	APT	/ SUITE #; CITY;		STATE; ZIP CODE
ADDRESS						
(Residence or Business)	REDACTED PER	254.0313, GOV'T	CODE			
(Residence of Business)						
7 CAMPAIGN	AREA CODE PI	HONE NUMBER	EXTENSION			
TREASURER PHONE	(713) 882-6830					
THOME						
8 REPORT						
TYPE	January 15	30th day befor	e election	Runoff		campaign treasurer officeholder only)
	July 15	X 8th day before		Exceeded modified	-	
		X 8th day before		eporting limit		Attach C/OH-FR)
		.		Manth Dav	Veer	
9 PERIOD COVERED	Month Day Ye			Month Day	Year	
0011.12	09/27/2024	1	HROUGH	10/26/202	4	
		. 1				
10 ELECTION	ELECTION DATE			ELECTION TYPE	_	
	Month Day Ye		Primary	Runoff	Other	
	11/05/2024		General	Special		
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	(if known)	
	Court Of Appeals, Just	ice Place 8 Distric	t 14	Court Of Appeal		e 8 District 14
			· ⊥ ¬	Court Of Appeal		
		GO	TO PAGE 2			

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 23

13 C / OH NAME	Poissant, Margaret A	. (The Honorable)	14 Filer ID 00082057	(Ethics Commission File	rs)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without t I officeholders are required to report this information	he candidate's or office	eholder's knowledge or		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRES	S			
16 CONTRIBUTION TOTALS						
			-	\$ 13,325.	.00	
EXPENDITURE		PLEDGES, LOANS, OR GUARANTEES OF LOANS ZED POLITICAL EXPENDITURES	5)	•		
TOTALS				\$ 0.	.00	
		\$ 29,976.	.97			
CONTRIBUTION BALANCE	5. TOTAL POLITICA REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L/ RIOD	AST DAY OF THE	\$ 48,579.	.93	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING 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.				
		The Honorat	ble Margaret A. Pois	ssant		
			Candidate or Officehol			
AFFIX NO	TARY STAMP / SEAL ABO	JVE				
Sworn to and subs	day					
of	, 20, to ce	ertify which, witness my hand and seal of office.				
Signature of offic	cer administering oath	Printed name of officer administering oath	Title of office	r administering oath		
Forms provided by Te	xas Ethics Commission	www.ethics.state.tx.us		Version V4.1.0.48da	51f7	

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

3 of 23

	18 FILER NAME 19 Filer ID(IPoissant, Margaret A. (The Honorable)00082057						
20 SCHEDULE			SUBTOTAL AMOUNT				
NAME OF S	CHEDULE		SOBTOTAL AMOUNT				
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$ 8,325.00				
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 5,000.00				
3.	3. SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)						
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$				
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	5	\$ 29,976.97				
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.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$				
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$				
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$				
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$				

The Instruction Guide explains how to co	1 Total pages Schedule A(J)1: Sch: 1/5 Rpt: 4/23
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Poissant, Margaret A. (The Honorable)	00082057
	-state PAC (ID#:) 7 Amount of Contribution (\$)
10/08/2024 Arocha, Mary	\$500.00
6 Contributor address; City; State; Zip	
Houston, TX 77024	0 Contributorio Job Title
8 Contributor's Principal Occupation office manager	9 Contributor's Job Title office manager
10 Contributor's employer/law firm	11 Law firm of contributor's spouse (if any)
Bernardino A Arocha	II Law IIIII of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)	
Date Full name of contributor out-	-state PAC (ID#:) Amount of Contribution (\$)
10/08/2024 Baird, Drew	\$200.00
Contributor address; City; State; Zip	
Houston, TX 77024	
Contributor's Principal Occupation	Contributor's Job Title
retired	retired
Contributor's employer/law firm	Law firm of contributor's spouse (if any)
retired	
If contributor is a child, law firm of parent(s) (if any)	
	-state PAC (ID#:) Amount of Contribution (\$)
10/08/2024 Boesel, Minnette	\$250.00
Contributor address; City; State; Zip	ode
Houston, TX 77019	Contributorio Job Title
Contributor's Principal Occupation Board President	Contributor's Job Title Board President
Contributor's employer/law firm	Law firm of contributor's spouse (if any)
Heritage Society Houston	Kean Miller, LP
If contributor is a child, law firm of parent(s) (if any)	
Forms provided by Texas Ethics Commission	www.ethics.state.tx.us. Version.V4.1.0.48da51f7

The Instruc	tion Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 2/5 Rpt: 5/23	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Poissant, Mar	rgaret A. (The Honorable)		00082057
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/13/2024	Bryant, Terry		\$700.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77024		
8 Contributor's Pr	rincipal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's er Self	mployer/law firm	11 Law firm of contributor's sp	oouse (if any)
	a child, law firm of parent(s) (if any)		
Date	Full name of contributor Out-of-state PAC (ID#:	ν.	Amount of Contribution (\$)
09/30/2024	Dacey, Derin)	\$15.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77011		
Contributor's Pi	rincipal Occupation	Contributor's Job Title	
Academic Ad	visor	Academic Advisor	
Contributor's er	nployer/law firm	Law firm of contributor's sp	oouse (if any)
University of I	Houston		
If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/01/2024	Kherkher, Steve		\$2,500.00
	Contributor address; City; State; Zip Code		
Contributorio	Houston, TX 77098	Constributorio Job Title	
Attorney	rincipal Occupation	Contributor's Job Title Attorney	
-	nployer/law firm	oouse (if any)	
Kherkher Gar			
	a child, law firm of parent(s) (if any)		
	v Texas Ethics Commission www.ethic	cs.state.tx.us	Version V4.1.0.48da51f7

The Instructi	on Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 3/5 Rpt: 6/23		
2 FILER NAME Poissant, Marg	aret A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00082057	
10/07/2024	Full name of contributor out-of-state PAC (ID#:_ Marks, Lester Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$1,250.00		
	Houston, TX 77005			
8 Contributor's Prin	ncipal Occupation			
Art Collector		Art Collector		
10 Contributor's emp Self	oloyer/law firm	11 Law firm of contributor's sp	ouse (if any)	
12 If contributor is a	child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
10/08/2024	Nielsen, Eric		\$250.00	
	Contributor address; City; State; Zip Code Houston, TX 77092			
Contributor's Prin	ncipal Occupation	Contributor's Job Title		
Trial lawyer		Trial lawyer		
Contributor's emp		Law firm of contributor's sp	ouse (if any)	
The Nielsen La				
The Nielsen La	child, law firm of parent(s) (if any) w Firm, P.C.			
Date Full name of contributor out-of-state PAC (ID#: 10/08/2024 Pardue, Evan Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$50.00	
	Houston, TX 77055			
Contributor's Prin		Contributor's Job Title	l	
Marketing		Marketing		
Contributor's emp	ployer/law firm	Law firm of contributor's sp	ouse (if any)	
Revolucion Holdings, LLC				
If contributor is a	child, law firm of parent(s) (if any)			
Forme provided by	Texas Ethics Commission www.ethic	s state tx us	Version V4 1 0 48da51f7	

The Instru	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 4/5 Rpt: 7/23	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Poissant, Ma	argaret A. (The Honorable)		00082057
4 Date	5 Full name of contributor out-of-state PAC (ID#	:)	7 Amount of Contribution (\$)
10/08/2024	Porteous, Donald		\$100.00
	6 Contributor address; City; State; Zip Code		
	Houston TV 77010		
0 Constributoria (Houston, TX 77019	9 Contributor's Job Title	
Attorney	Principal Occupation		
10 Contributor's e	pmplover/law firm	Attorney 11 Law firm of contributor's sp	Douise (if any)
Self			
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#	·)	Amount of Contribution (\$)
10/01/2024	Reed Smith	/	\$500.00
	Contributor address; City; State; Zip Code		•
	Pittsburgh, PA 15222		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#	:)	Amount of Contribution (\$)
10/03/2024	Smith, William		\$10.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77008		
Contributor's F	Principal Occupation	Contributor's Job Title	
retired		retired	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
retired			
If contributor is	s a child, law firm of parent(s) (if any)		
Forms provided	by Texas Ethics Commission www.ethio	cs.state.tx.us	Version V4.1.0.48da51f7

The Instru	ction Guide explains how to complete th	1 Total pages Schedule A(J)1: Sch: 5/5 Rpt: 8/23				
2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
	argaret A. (The Honorable)		00082057			
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of Contribution (\$)			
10/08/2024	Spagnoletti, Francis		\$1,000.00			
	6 Contributor address; City; State; Zip Code					
	Houston, TX 77002					
8 Contributor's F	I Principal Occupation					
Lawyer		Lawyer				
10 Contributor's e	employer/law firm	11 Law firm of contributor's s	pouse (if any)			
Spagnoletti L						
	s a child, law firm of parent(s) (if any)					
Date	Full name of contributor Out-of-state PAC		Amount of Contribution (\$)			
09/27/2024	Stewart, Jarod	(ID#:)	\$1,000.00			
05/21/2024						
	Contributor address; City; State; Zip Code					
	Washington, DC 20036					
	Principal Occupation	Contributor's Job Title				
Attorney		Attorney				
	employer/law firm	Law firm of contributor's s	spouse (if any)			
Steptoe LLP						
If contributor is	s a child, law firm of parent(s) (if any)					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instruction Guide explains how to complete this	1 Total pages Schedule A2: Sch: 1/1 Rpt: 9/23			
2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
Poissant, Margaret A. (The Honorable)		00082057		
⁴ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$		
5 Date 6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution	ก	
10/08/2024 Molina, Liliana		contribution (\$) description \$5,000.00 I Gallery, servers an	d valat	
7 Contributor address; City; State; Zip Code	I	Callery, Servers and valet		
Houston, TX 77098		Check if travel outside of Texas. Complete So	chedule 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) (See instructions)			
Art Gallery Owner	Owner			
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
Art of the World				
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explain	Office Ove Polling Ex Printing Ex Salaries/W	erhea pense xpens Vages	se s/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	•	13 1100 10 00	mpi		2	Filer ID	(Ethics Commission Filers)
1	Sch: 1/14 Rpt: 10/23	2	Poissant, Margaret A. (The Honorab	le)			3	00082057	
4	Date	5	Payee name						
	09/30/2024		Amegy						
6	Amount (\$)	7	Payee address; City; Stat	te; Zip Co	bde				
	\$2.00		1717 West Loop S.						
			Houston, TX 77027						
8	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description			
	OF		Fees	iciteduic)			outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE					Check if Austin	, TX,	officeholder living	expense
						paper statem	ent	fee	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office he	eld
		-							
	Date		Payee name						
	10/18/2024		Anspon, Catherine						
	Amount (\$)		Payee address; City; Stat	te; Zip Co	bde				
	\$500.00		7200 Shadyvilla Ln						
			Unit 29						
			Houston, TX 77055						
	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description			
	OF		Salaries/Wages/Contract Labor	iciteduic)		·	outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE		J					officeholder living	expense
						campaign sa	lary	,	
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ight			Office he	ld
	expenditure to benefit C/OI	٦							
	Date		Payee name						
	10/21/2024		Archdiocese of Galveston-Houston						
	Amount (\$)		Payee address; City; Stat	te; Zip Co	bde				
	\$75.00		1700 San Jacinto						
			Houston, TX 77002						
	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description			
	OF EXPENDITURE		Contributions/Donations Made By	-				de of Texas. Com	
			Candidate/Officeholder/Political Com	mittee				officeholder living	expense
						Red Mass Di	nne	÷I	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office he	eld
	openditore to benefit C/Of	•							

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	rhead pense pense ages/	e Contract Labor		Travel in District Travel Out of District	ment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (E	thics Commission Filers)
1	Sch: 2/14 Rpt: 11/23		Poissant, Margaret A. (The Honorable	e)			Ū	00082057	
4	Date	5	Payee name						
	10/21/2024		Bayou City Strategies						
6	Amount (\$)	7	Payee address; City; State;	; Zip Co	de				
	\$2,000.00		PO Box 667204						
			Houston, TX 77266						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Consulting Expense	,	ļ			de of Texas. Complete	
								officeholder living exp	
						fundraising, c	om	ipliance and ge	eneral consulting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Office sou	ght			Office held	
	Date		Payee name						
	10/21/2024		Bennos Cajun Seafood						
	Amount (\$)		Payee address; City; State;	; Zip Co	de				
	\$23.58		1212 Seawall Blvd.						
			Houston, TX 77550						
	PURPOSE	(2)			(b)	Description			
	OF	(a)	Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)	(0)	Description Check if travel of	outsi	de of Texas. Complete	e Schedule T.
	EXPENDITURE		roou/Deverage Expense		į	Check if Austin,	TX,	officeholder living exp	ense
						campaign lun	ch		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght			Office held	
	Date		Payee name						
	10/24/2024		CVS						
	Amount (\$)	┝		Zip Co					
	\$28.77		5401 Washington Ave.	, zip co	ac				
	Ψ20.11		5401 Washington Ave.						
			Houston, TX 77007						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Food/Beverage Expense					de of Texas. Complete	
								officeholder living exp	ense
						supplies for p		WUIKEIS	
		L		D#: -				011	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Office sou	gnt			Office held	

			EXPENDITURE CATEGORI	ES FOR	BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Repay Office Over Polling Exp Printing Exp Salaries/Wa	rment/Reimbursement nead/Rental Expense ense iense iges/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 F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 3/14 Rpt: 12/23		Poissant, Margaret A. (The Honorable)				00082057			
4	Date 10/26/2024		Payee name CVS							
6	Amount (\$) \$32.62		Payee address; City; State; 5401 Washington Ave. Houston, TX 77007	Zip Coo	e					
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sched Food/Beverage Expense	dule)		ı, ТХ,	de of Texas. Complete Schedule T. officeholder living expense workers			
9	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name Of	fice soug	ht		Office held			
	Date		Payee name							
	09/27/2024		Cantu, Jennifer							
	Amount (\$)		Payee address; City; State;	Zip Coc	е					
	\$2,450.00		527 Jeff Davis Drive Richmond, TX 77459							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sched Consulting Expense	dule)		ı, ТХ,	de of Texas. Complete Schedule T. officeholder living expense Ort Bend			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Off	fice soug	ht		Office held			
	Date		Payee name							
	10/07/2024		Chevron							
	Amount (\$) \$57.82		Payee address; City; State; 6633 Washington Ave.	Zip Coo	e					
			Houston, TX 77007							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sched Travel In District	dule)		ı, ТХ,	de of Texas. Complete Schedule T. officeholder living expense n vehicle			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Off	fice soug	ht		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explai	Office C Polling Printing Salaries	Overhea Expens J Expen s/Wage	se s/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 F1:	2									
-	Sch: 4/14 Rpt: 13/23		Poissant, Margaret A. (The Honora	ble)				Filer ID (Ethics Commission Filers) 00082057			
4	Date	5	Payee name								
	10/21/2024		Chevron								
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip (Code						
	\$40.44		6633 Washington Ave.								
			Houston, TX 77007								
8	PURPOSE	(a)	Category (See Categories listed at the top of this	cobodula)	(b)	Description					
-	OF	`	Travel In District	Schedulej			outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE					Check if Austin	, TX,	, officeholder living expense			
						fuel for camp	aig	n vehicle			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ought			Office held			
	Date	Γ	Payee name								
	10/18/2024		Dent, Almeda								
	Amount (\$)	┢	Payee address; City; Sta	ate; Zip (Code						
	\$250.00		7900 Morley st.	, I-							
	+======										
			Houston, TX 77061								
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign salary 					officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ought			Office held			
	Date	Γ	Payee name								
	10/10/2024		Galveston County Democratic Party	/							
	Amount (\$)	┢		ate; Zip (Code						
	\$1,000.00		509 Laurel St.	,	000.2						
	+=,000										
			Texas City, TX 77591								
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description					
	EXPENDITURE		Salaries/Wages/Contract Labor					ide of Texas. Complete Schedule T.			
						poll greeters	, IX,	, officeholder living expense			
						poligieeleis					
		Ľ									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ought			Office held			

			EXPENDITURE CATEGOR		BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/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 F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 5/14 Rpt: 14/23		Poissant, Margaret A. (The Honorable))			00082057			
4	Date	5	Payee name							
	10/20/2024		Greater Barbour Chapel Baptist							
6 Amount (\$) 7 Payee address; City; State; Zip Code										
	\$50.00		7420 FM 1765							
			Texas City, TX 77591							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Contributions/Donations Made By				side of Texas. Complete Schedule T.			
			Candidate/Officeholder/Political Commi	ittee		ı, TX	c, officeholder living expense			
					donation					
Ļ	Complete ONLY if direct	L	Candidate/Officeholder name O	ffice cour	.ht		Office held			
9	expenditure to benefit C/OI			office sou	jiit		Office field			
⊨	Date		Payee name							
	10/20/2024		Greater St Matthews Church							
	Amount (\$)		Payee address; City; State;	Zip Co	le					
	\$20.00		7701 Jutland Rd.							
	\$20.00									
			Houston, TX 77033							
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Contributions/Donations Made By			heck if travel outside of Texas. Complete Schedule T.				
			Candidate/Officeholder/Political Commi	ittee		ı, TX	c, officeholder living expense			
					donation					
L	Complete ONLY if direct	L	Candidate/Officeholder name O	office soug	ubt		Office held			
	expenditure to benefit C/OI			nice sou	jiit		Onice held			
F	Date		Payee name							
	10/15/2024		Grimes County Democratic Party							
	Amount (\$)		Payee address; City; State;	Zip Co	le					
	\$250.00		100 S. Main Street.							
			Anderson, TX 77830							
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Contributions/Donations Made By				side of Texas. Complete Schedule T.			
			Candidate/Officeholder/Political Commi	ittee	Check if Austir donation	n, TX	K, officeholder living expense			
					uunallun					
⊢	Complete ONLY if direct	L	Candidate/Officeholder name O	office soug	uht		Office held			
	expenditure to benefit C/Oł			mice sou(jin		Onice neid			
⊢										

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains f	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/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 F1:	2			• • • • • •	3	Filer ID (Ethics Commission Filers)			
-	Sch: 6/14 Rpt: 15/23		Poissant, Margaret A. (The Honorable))		ľ	00082057			
4	Date		Payee name	,						
	10/09/2024		Harris County Democratic Party							
6	Amount (\$)			Zip Co	de					
	\$15,000.00		4619 Lyons Ave.							
			Houston, TX 77020							
8	PURPOSE		Category (See Categories listed at the top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Commi	ittaa			de of Texas. Complete Schedule T. officeholder living expense			
			Candidate/Oncerioide/Political Comm	illee	coordinated					
						Ū				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name O)ffice sou	yht		Office held			
	Date		Payee name							
	09/27/2024		Harry's							
	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$66.18		318 Tuam St.							
			Houston, TX 77006							
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	(b) Description					
	EXPENDITURE		Food/Beverage Expense				de of Texas. Complete Schedule T. officeholder living expense			
					campaign me					
							-			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	Office sou	jht		Office held			
	Date		Payee name							
	10/16/2024		Herald Publishing							
	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$490.00		3403 Audley							
			Houston, TX 77098							
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	(b) Description					
	EXPENDITURE		Advertising Expense				de of Texas. Complete Schedule T. officeholder living expense			
					Voter Guide					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	Office sou	Jht		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expen Imittee Legal Services The Instruction Guide e		Office Over Polling Exp Printing Exp Salaries/Wa	head/Re ense oense ages/Cor	eimbursement intal Expense ntract Labor t his form.		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2		-		-		3	Filer ID	(Ethics Commission Filers)
-	Sch: 7/14 Rpt: 16/23		Poissant, Margaret A. (The Hor	orable	e)				00082057	
4	Date	5	Payee name							
	10/07/2024		Hotel Zaza							
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	le				
	\$12.00		5701 Main St.							
			Houston, TX 77005							
8	DUDDOSE	<u> </u>				(h) =				
ð	PURPOSE OF		Category (See Categories listed at the top)	of this sch	iedule)	De (u)	escription	nutsir	te of Texas. Com	plete Schedule T.
	EXPENDITURE		Event Expense						officeholder living	
						ev	ı ent parking			
9	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht			Office he	eld
	Date		Payee name							
	10/08/2024		Houston Dairy Maids							
	Amount (\$)		Payee address; City;	State	; Zip Coo	le				
	\$191.00		201 Airline Dr.	State,	, 20 000					
	\$191.00									
			Houston, TX 77009							
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense food for campaign event at Art of the Worl 					g expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht			Office he	eld
	Date		Payee name							
	10/03/2024		Hurley, Tate							
	Amount (\$)		Payee address; City;	State	; Zip Coo	le				
	\$1,240.00		206 Oarwood Place	otuto,	, 20 000					
	φ1,240.00									
			Spring, TX 77389							
	PURPOSE	(a)	Category (See Categories listed at the top	of this sch	nedule)	(b) De	escription			
	OF EXPENDITURE		Salaries/Wages/Contract Labor			ca	1	ΤX,	officeholder living	plete Schedule T. 9 expense
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht			Office he	eld

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense ittee Legal Services The Instruction Guide explain:	Office Overhea Polling Expens Printing Expens Salaries/Wages	se s/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 F1:	· · ·	3 Filer ID (Ethics Commission Filers)							
-	Sch: 8/14 Rpt: 17/23	oissant, Margaret A. (The Honorabl	e)		00082057					
4	Date 10/17/2024	ayee name urley, Tate								
6	Amount (\$) \$900.00	ayee address; City; Stat 06 Oarwood Place pring, TX 77389	e; Zip Code							
8	PURPOSE	ategory (See Categories listed at the top of this se	(b)	Description						
~	OF EXPENDITURE	alaries/Wages/Contract Labor	meaule)	Check if travel of	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense Alary					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	ndidate/Officeholder name	Office sought		Office held					
	Date	Payee name								
	10/10/2024	In Bloom								
	Amount (\$)	ayee address; City; Stat	e; Zip Code							
	\$148.30	14 Fairway St.	6, <i>L</i> ip Coac							
		ouston, TX 77006								
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this so ift/Awards/Memorials Expense	chedule) (b)	Check if Austin,	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense owers for Art of the World Gallery					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sought		Office held					
	Date	ayee name								
	10/08/2024	&N Enterprises								
	Amount (\$)	·	e; Zip Code							
	\$1,685.06	519 Fairway Park Dr.	o, <u>Lip</u> oouo							
	+1,000.00	te. 302								
		ouston, TX 77092								
			a							
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this so rinting Expense	chedule) (b)		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense Brature					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sought		Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explai	Office Ov Polling Ex Printing E Salaries/	verhead xpense Expens Wages	e /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 F1:	2			•		3	Filer ID (Ethics Commission Filers)				
-	Sch: 9/14 Rpt: 18/23		Poissant, Margaret A. (The Honoral	ole)				00082057				
4	Date	5	Payee name									
	09/30/2024		Mission of Yahweh									
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip Co	ode							
	\$300.00		10247 Algiers Rd.									
			Houston, TX 77041									
8	PURPOSE	(a)	Category (See Categories listed at the top of this	oobodulo)	(b)	Description						
Ē	OF		Contributions/Donations Made By	schedule)	()		outsi	ide of Texas. Complete Schedule T.				
	EXPENDITURE		Candidate/Officeholder/Political Con	nmittee		Check if Austin	, тх,	, officeholder living expense				
						fundraiser do	nat	tion				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder name	Office sou	ught			Office held				
	Date		Payee name									
	10/03/2024		National Association of Women Judg	ges								
	Amount (\$)		Payee address; City; Sta	ate; Zip Co	ode							
	\$255.00		PO Box 3363									
			Warrenton, VA 20188									
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description						
	OF EXPENDITURE		Contributions/Donations Made By	,		Check if travel	outsi	ide of Texas. Complete Schedule T.				
	EXPENDITORE		Candidate/Officeholder/Political Committee					ck if Austin, TX, officeholder living expense				
						membership	ren	newal				
	Complete ONLY if direct		andidate/Officeholder name	Office sou	ught			Office held				
	expenditure to benefit C/OI											
	Date		Payee name									
	10/21/2024		Party City									
	Amount (\$)		Payee address; City; Sta	ate; Zip Co	ode							
	\$50.44		3225 Southwest Fwy.									
			Houston, TX 77027									
⊢	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description						
	OF		Event Expense	schedulej		·	outsi	ide of Texas. Complete Schedule T.				
	EXPENDITURE					Check if Austin	, тх,	, officeholder living expense				
					1	Birthday supp	olie	S				
	Complete ONLY if direct		andidate/Officeholder name	Office sou	ught			Office held				
	expenditure to benefit C/OI	Н										

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Poling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	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 F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
-	Sch: 10/14 Rpt: 19/23	Poissant, Margaret A. (The Honorable)	00082057							
4	Date 10/18/2024	Payee name Patel, William								
6 Amount (\$) 7 Payee address; City; State; Zip Code \$315.00 2319 McClendon St										
		Houston, TX 77030								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense campaign salary										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held								
	Date	Payee name								
	10/24/2024	Piada								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$17.61	5801 Memorial Dr. Houston, TX 77007								
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign event 								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	10/22/2024	Raise the Money								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$312.66	PO Box 26466								
		Little Rock, AR 72221								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. FX, officeholder living expense S							
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains f	Office Ove Polling Exp Printing Ex Salaries/W	oense ages/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 F1:	2			•	3	Filer ID (Ethics Commission Filers)					
-	Sch: 11/14 Rpt: 20/23	-	Poissant, Margaret A. (The Honorable))			00082057					
4	Date 10/15/2024	5	Payee name Royal Sonesta									
6	Amount (\$) \$18.00	7	Payee address; City; State; 2222 W. Loop S. Houston, TX 77027	Zip Co	le							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense event parking												
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sought Office held									
	Date		Payee name									
	09/28/2024		St. Stephens Episcopal Church									
	Amount (\$) Payee address; City; State; Zip Code \$240.00 1805 W. Alabama St.											
			Houston, TX 77098									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Event Expense	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense event					
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held										
	Date		Payee name									
	10/04/2024		TSU School of Law									
	Amount (\$) \$300.00		Payee address;City;State;3100 Cleburne St.	Zip Co	le							
			Houston, TX 77004									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Event Expense	edule)			ide of Texas. Complete Schedule T. , officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ht		Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimburs Fees Office Overhead/Rental Exp Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Salaries/Wages/Contract L The Instruction Guide explains how to complete this fo	ense Transportation Equipment & Related Expense Travel in District Travel Out of District bor OTHER (enter a category not listed above)							
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)							
	Sch: 12/14 Rpt: 21/23	Poissant, Margaret A. (The Honorable)	00082057							
4	Date 10/21/2024	Payee name Fexas Bar Foundation								
6	Amount (\$)	Payee address; City; State; Zip Code								
ľ	\$270.00	515 Congress Ave.								
	\$210.00	20 00 ingrood / itol								
		Austin TX 79701								
_		Austin, TX 78701								
8	PURPOSE OF	Category (See Categories listed at the top of this schedule) (b) Descrip								
	EXPENDITURE		if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense							
			ing Life Fellow Contribution							
			5							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	10/15/2024	Fhai Town Sugarland								
-	Amount (\$)	Payee address; City; State; Zip Code								
	\$41.52	222 Hwy 6								
	\$41.0E	Ste. 500								
		Sugar Land, TX 77478								
	PURPOSE OF	Category (See Categories listed at the top of this schedule) (b) Descrip								
	EXPENDITURE		if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense							
			gn dinner							
			g							
	Complete ONLY if direct	andidate/Officeholder name Office sought	Office held							
	expenditure to benefit C/OI									
	Date	Payee name								
	10/24/2024	The Grove								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$27.45	L611 Lamar st.								
		Houston, TX 77010								
	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description	ion							
	OF EXPENDITURE		if travel outside of Texas. Complete Schedule T.							
			if Austin, TX, officeholder living expense							
		parking								
_	Complete ONUX 5 diagons									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	andidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/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 F1:	2	FILER NAME		-	Filer ID (Ethics Commission Filers)					
	Sch: 13/14 Rpt: 22/23		Poissant, Margaret A. (The Honorable	e)			00082057				
4	Date 10/17/2024		Payee name The Navasota Examiner								
6	Amount (\$) \$100.00		Payee address; City; State 115 Railroad St. Navasota, TX 77868	; Zip Co	le						
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Advertisment											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name (Office sou	Jht		Office held				
	Date		Payee name								
	10/10/2024		The Young and the Politics								
	Amount (\$)		Payee address; City; State	; Zip Co	le						
	\$1,000.00		5206 Madden Lane Houston, TX 77048								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Salaries/Wages/Contract Labor	nedule)			de of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name 0	Office sou	Iht		Office held				
	Date		Payee name								
	10/07/2024		Total Wine								
	Amount (\$) \$116.52		Payee address; City; State 2857 Katy Fwy.	; Zip Co	le						
			Houston, TX 77007								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Food/Beverage Expense	nedule)	Check if Austin	ı, ТХ,	de of Texas. Complete Schedule T. officeholder living expense gn event at Art of the World Gallery				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	Jht		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage Gift/Awards/Me Legal Services	e Expense emorials Expense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	ayment/Reimbursement rhead/Rental Expense pense xpense /ages/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 F1:	2	FILER NAM	Ε				3	Filer ID	(Ethics Commission Filers)		
	Sch: 14/14 Rpt: 23/23		Poissant, M	√argaret A.	(The Honorable)			00082057			
4	Date	5	Payee name	e								
	10/16/2024		Walker @	Main								
6	Amount (\$)	7	Payee addr	ess; City	; State;	Zip Co	de					
	\$25.00		8200 Main	St.								
			Houston, T	X 77002		-						
8	PURPOSE	(a)	Category (See Categories li	sted at the top of this sch	edule)	(b) Description					
	OF EXPENDITURE		Event Exp	ense					ide of Texas. Com , officeholder living	nplete Schedule T.		
							event parking		, onicenoider livini	y expense		
							event parking	9				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Of	fficeholder na	ime C	Office sou	ght		Office h	eld		
	Date		Payee name									
	10/15/2024		Young, Deborah									
	Amount (\$)		Payee address; City; State; Zip Code 301 Fannin St.									
	\$75.00											
			Houston, T	TX 77002								
	PURPOSE	(a)	Category (See Categories li	sted at the top of this sch	edule)	(b) Description					
	OF EXPENDITURE	Food/Beverage Expense							nplete Schedule T.			
						court thanksg		, officeholder living				
							Court thanksy	jivii		I		
	Complete ONLY if direct		Candidate/Of	fficeholder na	ime C	Office sou	aht		Office h	eld		
	expenditure to benefit C/OI		Sandidate/O				giit		Office In			