CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to compl	ete this form.	1 Filer ID (Ethics Comm 0008888		2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE I	JSE ONLY
OFFICEHOLDER NAME	Mrs.	Jennifer L.			Date Received	
					ELECTRONICA	LLY FILED
	NICKNAME	LAST		SUFFIX	10/28/2024	
		Brummell				
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	/ SUITE #; CIT		ZIP CODE	Date Hand-delivered or	Date Postmarked
MAILING ADDRESS	721 Mason Ln.				Receipt #	Amount
Change of Address	Waxahachie, TX 75167				Date Processed	
					Data Imagad	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME	Mrs.	Jennifer L.				
	NICKNAME	LAST		SUFFIX		
		Brummell				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX DI EQSE).	ΔΡ	T / SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER ADDRESS	721 Mason Ln	BOXT LL. GL,	/ "	1/30πLπ, σπ.,	5.7.	IE, ZII CODE
(Residence or Business)	Waxahachie, TX 75167					
7 CAMPAIGN TREASURER		IE NUMBER	EXTENSION			
PHONE	(318) 402-6843					
8 REPORT TYPE	January 15	30th day before	e election	Runoff	15th day after can	
	10h/1E	7 oth day hoforo	alastian	Evacaded modified	appointment (offic	
	July 15	8th day before	election L	Exceeded modified reporting limit	Final Report (Atta	cn С/Он-гк)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	09/27/2024	TI	HROUGH	10/26/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year 11/05/2024	∐ ^f	Primary	Runoff	Other	
	11/03/2024	X	General	Special		
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	(if known)	
				State Representa	ative District 10	
	1			<u>. l</u>		
GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 5

13 C / OH NAME	Brummell, Jennifer L	(Mrs.)	14 Filer ID (00088888	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		L ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 135.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 11.23
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 942.02
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF 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 a under Title 15, Election Code.		
		Mrs. Je	ennifer L. Brummell	
			Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL AB	DVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
	orn to and subscribed before me, by the said day, this the day, 20, to certify which, witness my hand and seal of office.			
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				3 of 5	
18 FILER NAME Brummell, Jennifer L. (Mrs.) 19 Filer ID (Ethics Commission Filers) 00088888					
20 SCHEDUL NAME OF	SUBTO	TAL AMOUNT			
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	135.00	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$		
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
4.	SCHEDULE E: LOANS		\$		
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	11.23	
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	ONS	\$		
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUI	_E A1
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/5	
2	FILER NAME Brummell, Jo	ennifer L. (Mrs.)		3	Filer ID (Ethics Commission 00088888	on Filers)
4	Date 10/21/2024 5 Full name of contributor out-of-state PAC (ID#:) Clore, Priscilla 6 Contributor address; City; State; Zip Code			7	Amount of Contribution (\$)	\$25.00
8		Waxahachie, TX 75165 upation / Job title (See Instructions)	9 Employer (See Instruction	s)		
	Date 10/12/2024	Full name of contributor	NA		Amount of Contribution (\$)	\$10.00
	Principal occu Print Specia	Blairsville, GA 30512 upation / Job title (See Instructions) list	Employer (See Instruction IRS	s)		
	Date 10/07/2024	Full name of contributor out-of-state PAC (ID# Lansdowne, Paul Contributor address; City; State; Zip Code Midlothian, TX 76065			Amount of Contribution (\$)	\$100.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instruction Self	<u> </u> s)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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 (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 1/1 Rpt: 5/5	Brummell, Jennifer L. (Mrs.) 00088888
4	Date	5 Payee name
	10/13/2024	ActBlue
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4.25	366 Summer St
		Somerville , MA 02144
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
		fee for donation services
_	Occupated ONLY if alice at	Occadidate (Office helder grown
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/29/2024	ActBlue
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.98	366 Summer St
		Somerville , MA 02144
	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
		fee for donation service
	Occupated ONLY if alice at	One distance (Office health as a second seco
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	'	
	Date	Payee name
	10/01/2024	First Financial Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.00	1490 E. Main St
		Midlothian, TX 76065
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		banking fee
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	poa.taro to borioni 0/01	