

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00086309	2 Total pages filed: 11			
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Daniel	MI MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/28/2024		
	NICKNAME	LAST Lee	SUFFIX			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 1305 Prairie St STE 300 Houston, TX 77002			Date Hand-delivered or Date Postmarked		
	Receipt #			Amount		
	Date Processed					
	Date Imaged					
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Jose	MI MI			
	NICKNAME	LAST Villagomez	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 20902 teocalli dr katy, TX 77449					
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION			
	(956)	358-2144				
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)					
9 PERIOD COVERED	Month	Day	Year	Month	Day	Year
		09/27/2024		THROUGH		10/26/2024
10 ELECTION	ELECTION DATE Month Day Year 11/05/2024		ELECTION TYPE			
	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special					
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known) State Representative District 26		

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME	Lee, Daniel (Mr.)	14 Filer ID	(Ethics Commission Filers)
		00086309	

15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,311.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 21,334.73
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 17,965.23
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Daniel Lee

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Lee, Daniel (Mr.)		19 Filer ID (Ethics Commission Filers) 00086309
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,311.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 18,334.73
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 3,000.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/6 Rpt: 4/11
2 FILER NAME Lee, Daniel (Mr.)		3 Filer ID (Ethics Commission Filers) 00086309
4 Date 10/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albelo, Elizabeth (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77494	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Compliance Officer		9 Employer (See Instructions) US Dept of Labor
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Busby, Christopher (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77061	Amount of Contribution (\$) \$126.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Ascension
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calanni, Gina (Mrs.) <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$326.00
Principal occupation / Job title (See Instructions) Director of Finance		Employer (See Instructions) Color Factory
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chang, Victor (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington, TX 76014	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuellar, Lilia (Mrs.) <hr/> Contributor address; City; State; Zip Code San Juan, TX 78589	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Sharyland ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/6 Rpt: 5/11
2 FILER NAME Lee, Daniel (Mr.)		3 Filer ID (Ethics Commission Filers) 00086309
4 Date 10/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnelly, Beth (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77450	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Library Tech		9 Employer (See Instructions) HCPL
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Alex (Mr.) <hr/> Contributor address; City; State; Zip Code Fulshear, TX 77441	Amount of Contribution (\$) \$162.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hunt Law Firm PLLC
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe, Caroline (Ms.) <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keating, Shelley (Mrs.) <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$260.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawal, Bade (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$260.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/6 Rpt: 6/11
2 FILER NAME Lee, Daniel (Mr.)		3 Filer ID (Ethics Commission Filers) 00086309
4 Date 10/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Malissa (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Harker Heights , TX 76548	7 Amount of Contribution (\$) \$26.00
8 Principal occupation / Job title (See Instructions) VSR		9 Employer (See Instructions) Dept Veterans Affairs
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Wea (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77063	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Newspaper Southern News
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lu, Shawn (Mr.) <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$260.00
Principal occupation / Job title (See Instructions) Tech Director		Employer (See Instructions) P2 Energy Services
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ma, Patrick (Mr.) <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Real Estate Investment		Employer (See Instructions) Attainable Real Estate
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgill, James (Mr.) <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$1,026.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) Schneider Electric

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/6 Rpt: 7/11
2 FILER NAME Lee, Daniel (Mr.)		3 Filer ID (Ethics Commission Filers) 00086309
4 Date 10/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miao, Tinakkin (Ms.) <hr/> 6 Contributor address; City; State; Zip Code katy, TX 77450	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) unemployed		9 Employer (See Instructions) unemployed
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Ly (Mrs.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$1,026.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Nguyen Law PC
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pena, Daniel (Mr.) <hr/> Contributor address; City; State; Zip Code Fulshear, TX 77441	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Solis
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roane, Marilyn (Mrs.) <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryall, Elizabeth (Mrs.) <hr/> Contributor address; City; State; Zip Code Katy, TX 77493	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Axiom Space

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/6 Rpt: 8/11
2 FILER NAME Lee, Daniel (Mr.)		3 Filer ID (Ethics Commission Filers) 00086309
4 Date 10/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryall, Rachel (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77493	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Cyfair ISD
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slate, Dennis (Mr.) <hr/> Contributor address; City; State; Zip Code houston, TX 77027	Amount of Contribution (\$) \$526.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Self
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas AFL-CIO STATE COPE FUND <hr/> Contributor address; City; State; Zip Code Austin, TX 78711	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thering, Mark (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Thering Law
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gonzales, erick (Mr.) <hr/> Contributor address; City; State; Zip Code lake jackson, TX 77566	Amount of Contribution (\$) \$126.00
Principal occupation / Job title (See Instructions) retail		Employer (See Instructions) big texas breaks

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/6 Rpt: 9/11
2 FILER NAME Lee, Daniel (Mr.)		3 Filer ID (Ethics Commission Filers) 00086309
4 Date 10/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kim, kellie (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98122	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) OPS		9 Employer (See Instructions) Aws
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) zwernemann, allen (Mr.) <hr/> Contributor address; City; State; Zip Code houston, TX 77077	Amount of Contribution (\$) \$260.00
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) zernemann law firm

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/1 Rpt: 10/11	2 FILER NAME Lee, Daniel (Mr.)	3 Filer ID (Ethics Commission Filers) 00086309
4 Date 10/26/2024	5 Payee name Dibrell and Associates	
6 Amount (\$) \$2,100.00	7 Payee address; City; State; Zip Code 4203 Glade Shadow Ct Katy, TX 77494	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mail
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/16/2024	Payee name Dibrell and Associates	
Amount (\$) \$12,578.00	Payee address; City; State; Zip Code 4203 Glade Shadow Ct Katy, TX 77494	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing cards
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/26/2024	Payee name Trenton Hoyt LLC	
Amount (\$) \$3,656.73	Payee address; City; State; Zip Code 17350 State Highway 249 houston, TX 77064	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Poll expenses
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 11/11	2 FILER NAME Lee, Daniel (Mr.)	3 Filer ID (Ethics Commission Filers) 00086309
4 Date 10/18/2024	5 Payee name Ashade Tech Inc.	
6 Amount (\$) \$3,000.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1000 Main St., #2300g Houston, TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held