# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to comp	sion Filers)	2 Total pages filed: 28			
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	The Honorable	Eugene Y.			Date Received  ELECTRONIC	ALLY FILED
	NICKNAME	LAST		SUFFIX	10/28/2024	
	Gene	Wu				
4 CANDIDATE /	ADDRESS / PO BOX; APT	Γ / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING ADDRESS	5522 Jessamine				Receipt #	Amount
Change of Address	Houston, TX 77081					
	Tiodstoll, 17( 77001				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME	Mr.	Gerald M.				
	NICKNAME	LAST		SUFFIX		
		Birnberg		33.1		
6 CAMPAIGN	STREET ADDRESS (NO PO	D BOY DI EASE):	Λ D.7	/ SUITE #; CITY	· ct	ATE; ZIP CODE
TREASURER ADDRESS	843 W Friar Tuck	) BOX PLEASE),	API	/SOITE#, CITT	, 31/	ATE, ZIP CODE
(Residence or Business)	Houston, TX 77024					
7 CAMPAIGN TREASURER PHONE	AREA CODE PHO (713) 981-9595	NE NUMBER E	EXTENSION			
8 REPORT TYPE	January 15 [	30th day before X		Runoff  Exceeded modified reporting limit	15th day after ca appointment (off	
9 PERIOD COVERED	Month Day Year 09/27/2024	ТН	IROUGH	Month Day 10/26/202	Year 24	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	P	rimary	Runoff	Other	
	11/05/2024	ΧG	eneral	Special		
11 OFFICE	OFFICE HELD (if any)	l		12 OFFICE SOUGHT	Γ (if known)	
	State Representative Dis	trict 137			tative District 137	,
	1			l		
GO TO PAGE 2						

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

2 of 28

13 C / OH NAME	Wu, Eugene Y. (The	Honorable)	<b>14</b> Filer ID ( 00068103	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without I officeholders are required to report this information	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		<b>AL CONTRIBUTIONS</b> PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 7,010.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITION	AL EXPENDITURES		<b>\$</b> 11,967.10
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	<b>\$</b> 86,572.57
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 10,000.00
<b>17</b> AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.		
		The Hon	orable Eugene Y. Wı	ı
		Signature of	Candidate or Officehole	der
AFFIX NO	ΓARY STAMP / SEAL AΒ	OVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
of	, 20, to ce	ertify which, witness my hand and seal of office.		
Signature of office	er administering	Printed name of officer administering	Title of officer	administering oath

#### FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 28 19 Filer ID 18 FILER NAME (Ethics Commission Filers) 00068103 Wu, Eugene Y. (The Honorable) **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 7,010.00 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 3. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11,967.10 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how to complete th	his for	m.	1	Total pages Schedule A1: Sch: 1/4 Rpt: 4/28	
2	FILER NAME Wu, Eugene	Y. (The Honorable)			3	Filer ID (Ethics Commission 00068103	on Filers)
4			7	Amount of Contribution (\$)	\$25.00		
8	Principal occu	Houston, TX 77074 pation / Job title (See Instructions)	9	Employer (See Instructions	 s)		
	Not Employe			Not Employed	,		
	Date Full name of contributor out-of-state PAC (ID#:)  10/17/2024 Chao, Stephen  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
	<u> </u>	Houston, TX 77064			<u></u>		
		Employer (See Instructions UTHealth	S)				
Date Full name of contributor out-of-state PAC (ID#: 10/15/2024 Du, David  Contributor address; City; State; Zip Code		(ID#:		•	Amount of Contribution (\$)	\$1,000.00	
		Houston, TX 77027					
	Principal occu Real Estate	pation / Job title (See Instructions)		Employer (See Instructions QBS Consulting Group	5)		
Date Full name of contributor  10/21/2024 Floyd, John  Contributor address; City; State; Zip Code  Houston, TX 77098		)		Amount of Contribution (\$)	\$500.00		
				Employer (See Instructions John T Floyd Law Firm	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  10/17/2024 Foster, Charles  Contributor address; City; State; Zip Code  Houston, TX 77006-4013		•	Amount of Contribution (\$)	\$100.00		
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Foster Global LLP	5)		
			1				

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruc	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 2/4 Rpt: 5/28		
2	FILER NAME Wu, Eugene	Y. (The Honorable)			3	Filer ID (Ethics Commission 00068103	n Filers)	
4	Date 10/02/2024  5 Full name of contributor out-of-state PAC (ID#:) Ge, Ling 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$50.00			
_		Plano, TX 75025	1					
8	Principal occu Professor	pation / Job title (See Instructions)	9	Employer (See Instructions UNT	i)			
	Date Full name of contributor out-of-state PAC (ID#:)  10/07/2024 Goldstein, Robert  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00			
	Principal occu	Houston, TX 77082		Employer (See Instructions				
		Self	')					
Date Full name of contributor out-of-state PAC (II 09/29/2024 Hardigree, Matthew  Contributor address; City; State; Zip Code		out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$50.00		
		New Rochelle, NY 10805						
	Principal occu Producer	pation / Job title (See Instructions)		Employer (See Instructions TangentVector	i)			
Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$500.00			
	Principal occu ATTRONEY	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>			
	Date Full name of contributor out-of-state PAC (ID#:)  10/17/2024 National Association of Social Workers (NASW/Texas PACE)  Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$200.00			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			
			L_					

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1		
	The Instru	ction Guide explains how to complete th	is for	m.	1	Total pages Schedule A1: Sch: 3/4 Rpt: 6/28		
2	FILER NAME Wu, Eugene	Y. (The Honorable)			3	Filer ID (Ethics Commissio 00068103	n Filers)	
4	Date 10/17/2024			7	Amount of Contribution (\$)	\$1,000.00		
		Houston, TX 77096						
8	Principal occupation / Job title (See Instructions)  Professor  9 Employer (See Instructions)  University of Houston		5)					
	Date Full name of contributor out-of-state PAC (ID#:)  10/11/2024 Perez, Melissa  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00			
	San Francisco, CA 94110  Principal occupation / Job title (See Instructions)  Employer (See Instructions		<u> </u> 5)					
	Consultant self-employeed							
Date Full name of contributor out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$250.00			
		Houston, TX 77005						
Principal occupation / Job title (See Instructions)  MD  Employer (See Instructions)  Blue Fish Pediatrics- Gr			•	er Heights				
	Date Full name of contributor out-of-state PAC (ID#:)  10/17/2024 TREPAC/Texas Association of Realtors  Contributor address; City; State; Zip Code  Austin, TX 78768			Amount of Contribution (\$)	\$2,500.00			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			
	Date Full name of contributor out-of-state PAC (ID#:)  10/17/2024 TXCPA PAC  Contributor address; City; State; Zip Code  Addison, TX 75001			Amount of Contribution (\$)	\$500.00			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			

	MONETAR	Y POLITICAL CONTRIBI	UTION	NS		SCHEDU	LE <b>A1</b>
	The Instruction	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 4/4 Rpt: 7/28	
2	FILER NAME Wu, Eugene Y. (1	LER NAME /u, Eugene Y. (The Honorable)			3	Filer ID (Ethics Commission 00068103	on Filers)
4	Date 10/15/2024  5 Full name of contributor out-of-state PAC (ID#:) Xi, Yuanxin  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00		
8	Principal occupation	Pearland, TX 77584 n / Job title (See Instructions)	9	Employer (See Instructions	j 5)		
	Not Employed  Date Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00		
	Principal occupation / Job title (See Instructions)  Not Employed  Employer (See Instructions)  Not Employed			<u> </u> 5)			
	10/15/2024 Y	ull name of contributor out-of-state PA 'uan, Jason Contributor address; City; State; Zip Code Pflugerville, TX 78660	AC (ID#:			Amount of Contribution (\$)	\$50.00
		n / Job title (See Instructions)		Employer (See Instructions Not Employed	<u> </u> 5)		

#### SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Legal Services

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee   Legal Services   Salaries/Wages/Contract Labor   OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/21 Rpt: 8/28	Wu, Eugene Y. (The Honorable) 00068103
4	Date	5 Payee name
	10/06/2024	ActBlue TX
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1.98	PO Box 441153
		Somerville, MD 02114
8	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.
		Check if Austin, TX, officeholder living expense  Processing fees
		1 Toccssing ices
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
H	Date	Payee name
	10/13/2024	ActBlue TX
H	Amount (\$)	Payee address; City; State; Zip Code
	\$1.39	PO Box 441153
	Φ1.39	FO BOX 441133
		Conserville MD 00444
L		Somerville, MD 02114
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Processing fees
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
Г	Date	Payee name
	10/20/2024	ActBlue TX
	Amount (\$)	Payee address; City; State; Zip Code
	\$95.80	PO Box 441153
		Somerville, MD 02114
Г	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.
	2/11 2/13/17 C/12	Check if Austin, TX, officeholder living expense
		Processing fees
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$		

#### SCHEDULE F1

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

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	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: 2/21 Rpt: 9/28	Wu, Eugene Y. (The Honorable) 00068103
4	Date	5 Payee name
	09/30/2024	Amazon.com
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$50.71	PO Box 81226
		Seattle, WA 98108
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office supplies
		Cinico Supplies
Ļ	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/Ol	
⊨		
	Date	Payee name
L	09/30/2024	Amazon.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$7.19	PO Box 81226
		Seattle, WA 98108
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Office supplies
L	Complete ONLY if disent	Condidate/Officeholder neme
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
┡		
	Date	Payee name
	09/30/2024	Amazon.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$134.48	PO Box 81226
		Seattle, WA 98108
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Office supplies
$\vdash$	Complete ONLY if direct	Condidate/Officeholder name Office cought
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
$\vdash$	-	
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#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitl/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	Il 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: 3/21 Rpt: 10/28	Wu, Eugene Y. (The Honorable) 00068103
4	Date	5 Payee name
	10/09/2024	Amazon.com
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$19.87	PO Box 81226
		Seattle, WA 98108
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office supplies
		Cinice Supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
F	Date	Payee name
	10/10/2024	Amazon.com
H	Amount (\$)	Payee address; City; State; Zip Code
	\$86.09	PO Box 81226
		Seattle, WA 98108
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Office supplies
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>1</del>
	Date	Payee name
	10/21/2024	Amazon.com
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$16.64	PO Box 81226
		Seattle, WA 98108
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Office supplies
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		
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#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

xpense Event Expense Loan Repayment/Reimbu

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

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

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: 4/21 Rpt: 11/28	Wu, Eugene Y. (The Honorable) 00068103
4	Date	5 Payee name
L	10/21/2024	Amazon.com
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$194.80	PO Box 81226
		Seattle, WA 98108
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office supplies
		Cinice Supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	10/15/2024	Apollo Answering Service
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$89.85	PO Box 70919
		Houston, TX 77270
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Telephone service
		1.5.5p.io.io selvino
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	09/30/2024	Arco Seafood
	Amount (\$)	Payee address; City; State; Zip Code
	\$193.44	9896 Bellaire Blvd Ste K
		Houston, TX 77036
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Staff meals
		Stail Heats
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
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#### 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	d 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: 5/21 Rpt: 12/28	Wu, Eugene Y. (The Honorable) 00068103
4	Date	5 Payee name
	10/16/2024	Avis.com
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.84	PO Box 699000
		Tulsa, OK 74169
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related    Check if travel outside of Texas. Complete Schedule T.   Check if Austin, TX, officeholder living expense
		Expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	H .
	Date	Payee name
	10/24/2024	Baker Ripley
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	6500 Rookin St
		Houston, TX 77074
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
	Date	Payee name
	10/07/2024	Bellaire Express
H	Amount (\$)	Payee address; City; State; Zip Code
	\$38.15	6512 S Rice Ave
		Bellaire, TX 77401
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense Fuel
$\vdash$	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 Contributions/ Donations Made By -Candidate/Officeholder/Political Com

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 6/21 Rpt: 13/28	Wu, Eugene Y. (The Honorable) 00068103
4	Date	5 Payee name
	10/26/2024	Bobby's Burgers
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$25.74	3570 Las Vegas Blvd S
		Las Vegas, NV 89109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Meals
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/22/2024	Breaktime
	Amount (\$)	Payee address; City; State; Zip Code
	\$37.73	6300 Richmond Ave
		Houston, TX 77057
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related  Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Fuel
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/17/2024	CVPE Educational Forum
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	619 E 11Th 1/2 St
		Houston, TX 77008
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Event donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
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#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	ove)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commissi	on Filers)
	Sch: 7/21 Rpt: 14/28	Wu, Eugene Y. (The Honorable) 00068103	
4	Date	5 Payee name	
	10/25/2024	Cafe Americano	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$86.06	3570 Las Vegas Blvd S	
		Las Vegas, NV 89109	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Meals	
		Wicais	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
	Date	Payee name	
	10/03/2024	Canva	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$119.99		
	Ψ113.33	73 E Santa Ciara St	
		San Jose, CA 95113	
	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	
		Graphics software - reimbursed to Kimberly	/ Paige
		Dodge	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experialitare to beliefit eroi		
	Date	Payee name	
	10/03/2024	Chevron	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$43.98	5410 Chimney Rock Rd	
		Houston, TX 77081	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Transportation Equipment And Related  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Expense Check if Austin, TX, officeholder living expense Fuel	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		

### 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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

ent Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
Travel Out of District

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 8/21 Rpt: 15/28	Wu, Eugene Y. (The Honorable) 00068103
4	Date	5 Payee name
	09/30/2024	Chuck Crews for Texas HD 128
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	PO Box 7010
		Baytown, TX 77522
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Contribution
_		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/30/2024	Costco Wholesale
	Amount (\$)	Payee address; City; State; Zip Code
	\$255.08	10401 Research Blvd
		Austin, TX 78759
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Event food
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/09/2024	Enterprise Rent A Car
	Amount (\$)	Payee address; City; State; Zip Code
	\$499.00	600 Corporate Park Dr
		Saint Louis, MO 63105
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense  Car rental
		- Cai Torrica
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	•

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILED NAME	3 Filer ID (Ethics Commission Filers)
_	Sch: 9/21 Rpt: 16/28	Wu, Eugene Y. (The Honorable)	00068103
4	Date	5 Payee name	
	10/10/2024	Eventbrite	
6	Amount (\$) \$28.52	7 Payee address; City; State; Zip Code 95 3rd St Fl 2	
_		San Francisco, CA 94103	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Bondtions wade by	utside of Texas. Complete Schedule T. TX, officeholder living expense nt
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	10/17/2024	Fairmont Pittsburgh	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$611.10	510 Market St	
		Pittsburgh, PA 15222	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Traver out of District	utside of Texas. Complete Schedule T.
			TX, officeholder living expense PI voter education and engagement
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	09/30/2024	HEB	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$228.90	5895 San Felipe St	
		Houston, TX 77057	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Onice Overneau/Nental Expense	utside of Texas. Complete Schedule T.
		Check if Austin, Office supplies	TX, officeholder living expense
		Office supplie.	-
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Office field

#### SCHEDULE F1

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

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services  The Instruction Guide	Salaries/V	Vages	/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission File	ers)
	Sch: 10/21 Rpt: 17/28		e Y. (The Honorabl	e)				00068103	•	,
4	Date	5 Payee name								
	10/02/2024	HEB								
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode					
	\$126.70	5895 San F	elipe St							
		Houston, T	K 77057							
8	PURPOSE	(a) Category (S	ee Categories listed at the to	op of this schedule)	(b)	Description				
	OF EXPENDITURE	Office Over	head/Rental Exper	ise		므		de of Texas. Comp		
						Office supplie		officeholder living	expense	
						Office Supplie				
9	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	ıaht			Office he	ald.	
	expenditure to benefit C/Ol		cerioidei riairie	Office 300	igiit			Office fic	, in the second	
	Date	Payee name								
	10/08/2024	HEB								
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$151.66	5895 San F	elipe St							
		Houston, T	X 77057							
	PURPOSE OF	(a) Category (Se	ee Categories listed at the to	op of this schedule)	(b)	Description				
	EXPENDITURE	Office Over	head/Rental Exper	ise		<b>=</b>		de of Texas. Comp		
						Office supplie		officeholder living	expense	
						Omec Supplic	,,			
	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	l laht			Office he	eld	
	expenditure to benefit C/OI				. 5					
-	Date	Dayloo nama								
	09/30/2024	Payee name	nty Tojana Domocr	ate						
			ity Tejano Democra							
	Amount (\$)	Payee addre		State; Zip Co	ode					
	\$250.00	3213 Houst	on Ave							
		Houston, T	K 77009							
	PURPOSE	(a) Category (S	ee Categories listed at the to	op of this schedule)	(b)	Description				
	OF EXPENDITURE		ns/Donations Made					de of Texas. Comp		
		Candidate/0	Officeholder/Politica	al Committee		_	, TX,	officeholder living	expense	
						Contribution				
_	Complete ONLY if direct	Candidata	ceholder name	Office	laht			Office he	ald.	
	Complete ONLY if direct expenditure to benefit C/OI		centituel Hairie	Office sou	ıyııl			Onice ne	au	
_										

#### 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/Politica Credit Card Payment	Committee   Legal Services   Salaries/Wages/Contract Labor   OTHER (enter a category not listed above)
1	Total pages Schedule F1:	
	Sch: 11/21 Rpt: 18/28	Wu, Eugene Y. (The Honorable) 00068103
4	Date 10/02/2024	5 Payee name Harris Victory Fund
Ļ		Harris Victory Fund
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$671.79	PO Box 96663
		Washington, DC 20090
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee Contribution
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	<u> </u>	
	Date	Payee name
	10/03/2024	Harris Victory Fund
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,091.17	PO Box 96663
		Washington, DC 20000
		Washington, DC 20090
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made Ry  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contribution
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
		·
	Date	Payee name
	10/26/2024	Honey Farms
	Amount (\$)	Payee address; City; State; Zip Code
	\$43.43	745 Highway 6 S
		Houston, TX 77079
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
	EM EMPHORE	Expense Check if Austin, TX, officeholder living expense  Fuel
		Fuei
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Oh	· · · · · · · · · · · · · · · · · · ·

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Ļ	=	
1	Total pages Schedule F1:	
_	Sch: 12/21 Rpt: 19/28	Wu, Eugene Y. (The Honorable) 00068103
4	Date	5 Payee name
L	10/25/2024	Houston Chronicle
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$29.99	4747 Southwest Fwy
		Houston, TX 77027
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Subscription
L		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
	Date	Payee name
L	10/18/2024	Jennifer Lee for Texas House District 55
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	PO Box 1916
		Temple, TX 76503
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	H 
	Date	Payee name
	09/30/2024	Kristian Carranza for Texas
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	PO Box 831436
		San Antonio, TX 78283
-	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H

#### SCHEDULE F1

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services  The Instruction G			Vages	s/Contract Labor		OTHER (enter a	a category not listed a	bove)
╙		_			dide explains i	low to co	ilipid	ete tilis loilli.	_			
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commiss	sion Filers)
	Sch: 13/21 Rpt: 20/28	l	Wu, Eugen	e Y. (The Hono	rable)					00068103		
4	Date	5	Payee name						_			
	10/23/2024	l	Laurel for T									
Ļ		┡					_					
l٥	Amount (\$)	'	Payee addre		State;	Zip Co	oae					
	\$250.00	l	PO Box 68	56								
		l										
l		l	San Antoni	o, TX 78209								
8	PURPOSE	(a)	Category	ee Categories listed at			(b)	Description				
ľ	OF	```		ee Categories listed at ns/Donations M		eaule)	(~)	_ :	outs	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE	l		Officeholder/Po		ttee				officeholder livin		
		l						Contribution				
		l										
9	Complete ONLY if direct	Ц,	^andidate/Off	iceholder name		ffice sou	aht			Office h	مام	
ľ	expenditure to benefit C/O		Sandidate/On	icendiaei name	O	ince 30u	giit			Office in	Ciu	
┡		_										
	Date	l	Payee name									
	09/30/2024	l	Mail Chimp									
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	de					
	\$140.71	l	512 Means	St NW Ste 404	Ļ							
		l										
		l	Atlanta, GA	20210								
L		L.										
	PURPOSE OF	(a)	Category (S	ee Categories listed at	the top of this sche	dule)	(b)	Description				
	EXPENDITURE	l	Office Over	head/Rental E	kpense			<b>=</b>		de of Texas. Cor officeholder livin	nplete Schedule T.	
		l						Email service		onicendider nvin	y expense	
								Linaii Scivice	•			
L		L_	. "				<u> </u>					
l	Complete ONLY if direct expenditure to benefit C/OI		Jandidate/Off	iceholder name	O	ffice sou	ignt			Office h	ela	
	experience to benefit of or											
	Date		Payee name									
	10/07/2024	l	Neu Hub									
┝	Amount (\$)		Payee addre	ss; City;	State:	Zip Co	ode					
l	\$34.73	l	709 Highwa	•	Otato,	p 00						
	φ04.10	l	700 riigiiwe	xy 1 = **								
		l										
			Smithville,	TX 78957								
	PURPOSE	(a)	Category (S	ee Categories listed at	the top of this sche	dule)	(b)	Description				
	OF EXPENDITURE	l		tion Equipment				Check if travel	outs	de of Texas. Cor	nplete Schedule T.	
l	LAFENDITORE	l	Expense					_	, TX	officeholder livin	g expense	
		l						Fuel				
L		L					L					
	Complete ONLY if direct		Candidate/Off	iceholder name	0	ffice sou	ght			Office h	eld	
	expenditure to benefit C/O	Н										
Г												
l												
Ī												

### 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/Wages/Contract Labor

	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)
l	Sch: 14/21 Rpt: 21/28	Wu, Eugene Y. (The Honorable) 00068103
4	Date	5 Payee name
	10/16/2024	North Shore Garage
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$5.00	20 E General Robinson St
l		
		Pittsburgh, PA 15212
8	PURPOSE	-
ľ	OF	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment And Related  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Expense Check if Austin, TX, officeholder living expense
		Parking
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experialture to beliefit C/OI	<u> </u>
	Date	Payee name
l	10/24/2024	Oyster House
	Amount (\$)	Payee address; City; State; Zip Code
	\$192.98	1516 Sansom St
		Philadelphia, PA 19102
Н	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Food/Beverage Expense
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Meals
L	Operation ONLY if dispose	Out it is to the later where the state of th
l	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
┡	·	
l	Date	Payee name
	10/23/2024	Peking Impression
l	Amount (\$)	Payee address; City; State; Zip Code
	\$162.38	9889 Bellaire Blvd Ste D-224
l		
l		Houston, TX 77036
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
l		Check if Austin, TX, officeholder living expense  Staff meals
		Stail meas
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		
l		

### 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

	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: 15/21 Rpt: 22/28	Wu, Eugene Y. (The Honorable) 00068103
4	Date	5 Payee name
	10/15/2024	Primanti Brothers
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$44.51	2 Market Sq
		Pittsburgh, PA 15222
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Meals
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientare to benefit G/OI	<u>'</u>
	Date	Payee name
	10/24/2024	Sheetz
	Amount (\$)	Payee address; City; State; Zip Code
	\$32.32	211 Mount Nebo Rd
		Pittsburgh, PA 15237
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense Fuel
		T del
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	10/15/2024	Shell
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.00	630 W US-84
		Fairfield, TX 75840
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense
		Fuel
	Operation ONE VIII II	Open districts (Office health are now as a constitution of the con
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
l		

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 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	
<u> </u>		
1	Total pages Schedule F1:	
	Sch: 16/21 Rpt: 23/28	Wu, Eugene Y. (The Honorable) 00068103
4	Date	5 Payee name
	10/26/2024	Starbucks
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$12.90	3570 Las Vegas Blvd S
		Las Vegas, NV 89109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Meals
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/16/2024	Station Square Garage
	Amount (\$)	Payee address; City; State; Zip Code
	\$8.00	125 W Station Square Dr
		Pittsburgh, PA 15219
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment And Related  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Expense Check if Austin, TX, officeholder living expense
		Parking
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	09/30/2024	Stephanie Morales Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	13527 N Tracewood Bnd
	Ψ500.00	20021 11 11 400 WOOD DITU
		Houston TV 77077
		Houston, TX 77077
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee Contribution
		Continuation
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 17/21 Rpt: 24/28	Wu, Eugene Y. (The Honorable) 00068103
4	Date	5 Payee name
	10/15/2024	Sunoco
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$50.35	3744 N Hess Rd
		Waterfall, PA 16689
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense  Fuel
		Fuel
_	Complete ONU V if allow	Condidate/Officeholder name
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/15/2024	The Notary Hotel
	Amount (\$)	Payee address; City; State; Zip Code
	\$661.34	21 N Juniper St
		Philadelphia, PA 19107
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Lodging - AAPI voter education and engagement
		events
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$	Data	
	Date	Payee name
	10/26/2024	The Westin Houston
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.24	1709 Dryden Rd
		Houston, TX 77030
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense
		Parking Parking
	Commission ONU Wife allows	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	The straight of the straight of the	•

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ising Expense Event Expense Loan Repayment/Reimbu

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

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

	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: 18/21 Rpt: 25/28	Wu, Eugene Y. (The Honorable) 00068103
4	Date	5 Payee name
	10/26/2024	The Westin Houston
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$16.24	1709 Dryden Rd
		Houston, TX 77030
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense Parking
		T dixing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Payee name
	10/16/2024	Three PNC Garage
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.00	600 Liberty Ave
		Pittsburgh, PA 15222
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.  Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Expense  Check if Austin, TX, officeholder living expense  Parking
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<b>o</b>
_	Data	
	Date	Payee name
	10/17/2024	Three PNC Garage
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	600 Liberty Ave
		Pittsburgh, PA 15222
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
	LXFENDITORE	Expense Check if Austin, TX, officeholder living expense
		Parking
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experialitate to bettern 6/01	<u>'</u>

### 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

	The Instruction Guide explains how to co	mplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 19/21 Rpt: 26/28	Wu, Eugene Y. (The Honorable)		00068103	
4 Date	5 Payee name			
10/01/2024	Uber			
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode		
\$78.58	1455 Market St			
	San Francisco, CA 94103			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	val autoida af Taura Ocura	data Cabadada T
EXPENDITURE	Transportation Equipment And Related Expense		vel outside of Texas. Comp stin, TX, officeholder living	
	2.000	Transporta		
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ıght	Office he	ld
expenditure to benefit C/O	1			
Date	Payee name			
10/02/2024	Uber			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$34.78	1455 Market St			
	San Francisco, CA 94103			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Transportation Equipment And Related Expense		vel outside of Texas. Comp stin, TX, officeholder living	
	Expense	Transporta		олронос
Complete ONLY if direct	Candidate/Officeholder name Office sou	ıght	Office he	ld
expenditure to benefit C/O	4			
Date	Payee name			
10/17/2024	Uber			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$20.98	1455 Market St			
	San Francisco, CA 94103			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Transportation Equipment And Related		vel outside of Texas. Comp stin, TX, officeholder living	
	Expense	Transporta		expense
Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>ı                                    </u>	Office he	ld
expenditure to benefit C/O				

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)				
	Sch: 20/21 Rpt: 27/28	Wu, Eugene Y. (The Honorable) 00068103					
4	Date	5 Payee name					
	10/26/2024	United Airlines					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$411.67						
		Chicago, IL 60606					
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense					
		Airfare - AAPI voter education and engagement					
		events					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_				
	expenditure to benefit C/O	H					
	Date	Payee name					
	10/07/2024	United Airlines					
	Amount (\$)	Payee address; City; State; Zip Code	_				
	\$184.28	233 S Wacker Dr					
		Chicago, IL 60606					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	_				
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense					
		Airfare - AAPI voter education and engagement					
		events					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_				
	expenditure to benefit C/O						
	Date	Payee name	=				
	10/10/2024	United Airlines					
	Amount (\$)	Payee address; City; State; Zip Code	_				
	\$376.95	233 S Wacker Dr					
	, , , ,						
		Chicago, IL 60606					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense  Airfare - AAPI voter education and engagement					
		events					
	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
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

Credit Card Payment	The Instruction Guide explains how to co	omplete	e this form.		
1 Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
Sch: 21/21 Rpt: 28/28	Wu, Eugene Y. (The Honorable)			00068103	
4 Date	5 Payee name		•		
10/17/2024	United Airlines				
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode			
\$857.95	233 S Wacker Dr				
	Chicago, IL 60606				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) D	Description		
OF EXPENDITURE	Travel Out of District	Check if travel outside of Texas. Complete Sch			
		ľ	Check if Austin, TX,		g expense on and engagement
			events	nei euucaii	on and engagement
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ıaht		Office he	7l4
expenditure to benefit C/C		agrit		Office In	Siu
Date	Davis same				
10/03/2024	Payee name  Vegas Born Bar and Grill				
		odo.			
Amount (\$) \$57.65	Payee address; City; State; Zip Co	oue			
φ57.05	5757 Wayne Newton Blvd				
	Loo Vorgo NV 00111				
	Las Vegas, NV 89111				
PURPOSE OF	(See Categories listed at the top of this scriedule)		Description  Check if travel outside	do of Toyon Com	nloto Schodulo T
EXPENDITURE	Food/Beverage Expense	<b> </b>	Check if Austin, TX,		
			<b>—</b> Meals		
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught		Office h	eld
expenditure to benefit C/C	)H				
Date	Payee name				
10/15/2024	Woodrow's Sandwich Shop				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$77.49 630 South St					
	Philadelphia, PA 19147				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) D	Description		
OF	Food/Beverage Expense	ا ا	Check if travel outside	de of Texas. Com	plete Schedule T.
EXPENDITURE			Check if Austin, TX,	officeholder living	g expense
		N	Meals		
0 1 2 2 2 2 2 2		<u> </u>			
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sou DH	ught		Office h	eld