### JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	n Guide explains how to c	omplete this form.	1 Filer ID (Ethics Commiss 00066411	sion Filers)	2 Total pages f	iled: 25
3 CANDIDATE /	MS / MRS / MR	FIRST	00000411	MI		
OFFICEHOLDER				IVII	OFFICE	USE ONLY
NAME	The Honorable	Fredericka M.			Date Received	
					ELECTRONIC	
	NICKNAME	LAST		SUFFIX	10/28/2024	
		Phillips				
					Date Hand-delivered	or Dato Postmarkod
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX;	APT/SUITE $\#$ ; CIT	Y,	ZIP CODE	Date Hand-delivered	of Date Postillarkeu
MAILING						
ADDRESS	REDACTED PER	254.0313, GOV'T C	ODE		Receipt #	Amount
Change of Address						
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER					IVII	
NAME	Mrs.	Alva				
	NICKNAME	LAST			SUFFIX	
		Wesley-Thoma	as			
6 CAMPAIGN	STREET ADDRESS (NO	PO BOX PLEASE);	APT	/ SUITE #; CITY;	ST	ATE; ZIP CODE
TREASURER ADDRESS						
ADDITESS	REDACTED PER	254.0313, GOV'T C	ODE			
(Residence or Business)	REB/(GTED TER	204.0010, 00710	OBL			
7 CAMPAIGN TREASURER		HONE NUMBER	EXTENSION			
PHONE	(713) 278-0800					
8 REPORT						
TYPE	January 15	30th day before	election	Runoff		ampaign treasurer
		_	_		appointment (of	
	July 15	X 8th day before		Exceeded modified	Final Report (At	tach C/OH-FR)
9 PERIOD	Month Day Ye	ar		Month Day	Year	
COVERED	09/27/2024	TF	IROUGH	10/26/202	4	
				_0,_0,_0_		
		- 1				
10 ELECTION	ELECTION DATE			ELECTION TYPE	_	
	Month Day Ye	ear P	rimary	Runoff	Other	
	11/05/2024		eneral	Special		
			cheral	Opeola		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	District Judge District	61 Harris		District Judge Di	strict 61	
		GO 1	O PAGE 2			
Forms provided by Te	exas Ethics Commission	www.et	hics.state.tx.us	<u></u>	Vers	sion V4.1.0.48da51f7

### JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 25

I

13 C / OH NAME	Phillips, Fredericka M	I. (The Honorable)	14 Filer ID 00066411	(Ethics Commission Filers)					
15 NOTICE FROM POLITICAL COMMITTEE(S)	committees to support the ceholder's knowledge or notice of such expenditures.								
Additional Pages		COMMITTEE NAME							
	GENERAL	COMMITTEE ADDRESS							
		COMMITTEE CAMPAIGN TREASURER NAME							
		COMMITTEE CAMPAIGN TREASURER ADDRE	ESS						
16 CONTRIBUTION TOTALS	<b>\$</b> 0.00								
		ICAL CONTRIBUTIONS		<b>\$</b> 9,350.00					
EXPENDITURE	OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)           EXPENDITURE         3.         TOTAL UNITEMIZED POLITICAL EXPENDITURES								
TOTALS				\$ 0.00					
	4. TOTAL POLIT	ICAL EXPENDITURES		<b>\$</b> 11,097.47					
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	<b>\$</b> 149,934.83					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A TING PERIOD	S OF THE LAST DAY	<b>\$</b> 0.00					
17 AFFIDAVIT									
		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code.	all information required	ccompanying report is to be reported by me					
		The Honora	able Fredericka M. Pl	hillips					
		Signature	of Candidate or Officeho	older					
AFFIX NO	TARY STAMP / SEAL AB	OVE							
		aid	, this the	day					
of	, 20, to c	ertify which, witness my hand and seal of office.							
Signature of offi	Signature of officer administering oathPrinted name of officer administering oathTitle of officer administering oath								
Forms provided by Te	exas Ethics Commissior	www.ethics.state.tx.us		Version V4.1.0.48da51f7					

### SUBTOTALS - JC/OH

### FORM JC/OH COVER SHEET PG 3

3 of 25

18 FILER Phillip	(Ethics Commission Filers)		
20 SCHEI NAME	SUBTOTAL AMOUNT		
1.	<b>\$</b> 9,350.00		
			<b>a</b> 3,550.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$
5.	X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	<b>\$</b> 11,097.47
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$
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 CONTRIBUTIO	DNS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

### MONETARY POLITICAL CONTRIBUTIONS

### SCHEDULE A(J)1

The Instruc	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 1/2 Rpt: 4/25	
2 FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)	
Phillips, Fred	lericka M. (The Honorable)	00066411	
4 Date 10/09/2024	5 Full name of contributor out-of-state PAC (ID#:_ Daniel, Patrick		7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77056		
	Principal Occupation	9 Contributor's Job Title	
law		lawyer	
10 Contributor's e Patrick Danie		<b>11</b> Law firm of contributor's sp	bouse (if any)
	s a child, law firm of parent(s) (if any)		
	s a child, law linn of parend(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
09/27/2024	Goldberg, Daniel		\$100.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77004		
	Principal Occupation	Contributor's Job Title	
Law		lawyer	
	mployer/law firm	Law firm of contributor's sp	bouse (if any)
	g Law Office PLLC		
	s 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	Gomez, michael		\$5,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77027		
Contributor's F	Principal Occupation	Contributor's Job Title	
law			
	mployer/law firm	Law firm of contributor's sp	bouse (if any)
Jim Adler & A			
If contributor is	s a child, law firm of parent(s) (if any)		
Eorms provided	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V4.1.0.48da51f7

### MONETARY POLITICAL CONTRIBUTIONS

### SCHEDULE A(J)1

The Instruc	tion Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 2/2 Rpt: 5/25
2 FILER NAME Phillips, Fred	ericka M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00066411	
10/23/2024	<ul> <li>Full name of contributor out-of-state PAC (ID#:_ Mundy, Dennis</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$250.00
	Tomball, TX 77375		
8 Contributor's P law	rincipal Occupation	9 Contributor's Job Title lawyer	
10 Contributor's en Mundy & Ass	ociates PLLC	<b>11</b> Law firm of contributor's sp	oouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)		
Date 09/30/2024	Full name of contributor out-of-state PAC (ID#:_ Pappas, Dean Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$2,500.00
Contributor's P	Houston, TX 77023 rincipal Occupation	Contributor's Job Title	
law		lawyer	
Dean G Papp	nployer/law firm pas Law Firm PLLC a child, law firm of parent(s) (if any)	Law firm of contributor's sp	oouse (if any)
Date 10/08/2024	Full name of contributor out-of-state PAC (ID#:_ Paxton, Richard Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$500.00
	Houston, TX 77005		
Contributor's P law	rincipal Occupation	Contributor's Job Title lawyer	
	nployer/law firm	Law firm of contributor's sp	oouse (if any)
Paxton Law F	irm		
If contributor is	a child, law firm of parent(s) (if any)		
Forms provided b	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V4.1.0.48da51f7

	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 Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid		Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Travel in District Travel Out of Distri	uipment & Related Expense
1	Total pages Schedule F1:	FII FR NAME		•		·	3	Filer ID	(Ethics Commission Filers)
-	Sch: 1/20 Rpt: 6/25		- dericka M. (The H	Honorable)	)			00066411	(
4	Date	Payee name							
	10/18/2024	Ace Parking							
6	Amount (\$) \$25.00	Payee addres	-	State;	Zip Coo	le			
		Houston, TX	X 77056						
8	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Travel In District</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense parking</li> </ul> </li> </ul>							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Offi	ceholder name	0	)ffice soug	ht		Office held	d
	Date	Payee name							
	10/05/2024	Adams, Del	oorah						
	Amount (\$) \$250.00	Payee addres unknown	ss; City;	State;	Zip Coo	le			
		Houston, TX	X 77029						
	PURPOSE OF EXPENDITURE	Contribution	ee Categories listed at the ns/Donations Mad Officeholder/Politie	le By		Check if Austir	n, TX,	ide of Texas. Comple , officeholder living e asantville com	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Offi	ceholder name	0	Office soug	ht		Office held	d
	Date	Payee name							
	09/28/2024	Amazon							
	Amount (\$) \$72.27	Payee addres 1516 Secor	-	State;	Zip Coo	le			
		Seattle, WA	98101						
	PURPOSE OF EXPENDITURE		ee Categories listed at the head/Rental Expe		edule)		ı, TX,	ide of Texas. Comple , officeholder living e I <b>IC</b>	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Offi	ceholder name	0	Office soug	ht		Office held	d

		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     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense       Legal Services     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)				
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)				
	Sch: 2/20 Rpt: 7/25	Phillips, Fredericka M. (The Honorable)	00066411				
4	Date 09/28/2024	Payee name Amazon					
6	Amount (\$) \$53.74	7 Payee address; City; State; Zip Code 1516 Second Ave Seattle, WA 98101					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign supplies					
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	Amazon					
	Amount (\$) \$68.54	Payee address; City; State; Zip Code 1516 Second Ave Seattle, WA 98101					
	PURPOSE OF EXPENDITURE	A) Category (See Categories listed at the top of this schedule)       (b) Description         Office Overhead/Rental Expense       Check if travel of the schedule)	outside of Texas. Complete Schedule T. TX, officeholder living expense S				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	10/01/2024	Amazon					
	Amount (\$) \$175.81	Payee address;City;State;ZipCode1516Second Ave					
		Seattle, WA 98101					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense Oplies				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	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		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: 3/20 Rpt: 8/25	Phillips, Fredericka M. (The Honorable)	00066411			
4	Date 10/02/2024	5 Payee name Area 5 Democrats				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$250.00	PO Box 608				
		Pasadena, TX 77501				
8	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense donation</li> </ul> </li> </ul>				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	10/02/2024	Bellagreen				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$67.18	2305 W Alabama St Houston, TX 77098				
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
F	Date	Payee name				
	10/15/2024	Brothers Taco House				
	Amount (\$) \$101.21	Payee address; City; State; Zip Code 1604 Emancipation Ave				
		Houston, TX 77003				
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	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/Political 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			3	Filer ID (Ethics Commission Filers)
	Sch: 4/20 Rpt: 9/25		Phillips, Fredericka M. (The Honorable	e)			00066411
4	Date 10/18/2024		Payee name Caracol				
6	Amount (\$) \$80.28		Payee address; City; State 2200 Post Oak Blvd Ste 160 Houston, TX 77056	; Zip Co	de		
8	PURPOSE OF EXPENDITURE	End/Beverage Expense					officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name (	Office sou	ght		Office held
	Date		Payee name				
	10/05/2024		Carrabba's				
	Amount (\$) \$112.29		Payee address; City; State 3111 Kirby Dr Houston, TX 77098	; Zip Co	de		
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Food/Beverage Expense	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense r
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name (	Office sou	ght		Office held
	Date		Payee name				
	10/21/2024		Chickfila				
	Amount (\$) \$139.09		Payee address; City; State 14335 East Sam Houston Pkwy N	; Zip Co	de		
			Houston, TX 77044				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Food/Beverage Expense	edule)		, тх,	de of Texas. Complete Schedule T. officeholder living expense eakfast
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght		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 tegal Services The Instruction Guide explains h	Office Over 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: 5/20 Rpt: 10/25		Phillips, Fredericka M. (The Honorable)	)			00066411	
4	Date 10/20/2024	5	Payee name Chip Cookies					
6	Amount (\$) \$23.43	7	7 Payee address; City; State; Zip Code 14309 E Sam Houston Pkwy N Ste 300 Houston, TX 77044					
8	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 event food sponsor					officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ht		Office held	
	Date		Payee name					
	09/30/2024		Frank's Pizza					
	Amount (\$) \$128.00		Payee address; City; State; 417 Travis Houston, TX 77002	Zip Coo	le			
	PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense       (b) Description 							
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name O	)ffice sou	ht		Office held	
	Date		Payee name					
	10/16/2024		Frontrunners Strategic Management Se	ervices				
	Amount (\$) \$1,000.00		Payee address; City; State; PO Box 8176	Zip Coo	le			
			Houston, TX 77288					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Consulting Expense	edule)		n, TX,	de of Texas. Complete Schedule T. officeholder living expense Outreach	
	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 Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains I	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: 6/20 Rpt: 11/25		Phillips, Fredericka M. (The Honorable)	)			00066411
4	Date	5	Payee name				
	10/23/2024		Frontrunners Strategic Management Se	ervices			
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de		
	\$1,500.00		PO Box 8176				
			Houston, TX 77288				
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	adula)	(b) Description		
-	OF		Consulting Expense	edule)		outs	ide of Texas. Complete Schedule T.
	EXPENDITURE						, officeholder living expense
					consulting fe	е	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name C	Office sou	ght		Office held
	Date		Payee name				
	10/09/2024		Frost Bank				
	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$4.00		6750 West Loop South				
			Houston, TX 77401				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	EXPENDITURE		Fees				ide of Texas. Complete Schedule T. , officeholder living expense
					bank fee	.,	,
⊢	Complete ONLY if direct	<u>с</u>	Candidate/Officeholder name C	)ffice sou	ght		Office held
	expenditure to benefit C/OI	Η			-		
-	Date		Payee name				
	10/05/2024		GoDaddy				
_	Amount (\$)		-	Zip Co			
	\$18.11		14455 N Hayden Rd	Zip Cu			
	Ψ10.11		-				
			Ste 219				
			Scottsdale, AZ 85260				
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	(b) Description		
	EXPENDITURE		Advertising Expense				ide of Texas. Complete Schedule T. , officeholder living expense
					website	, 17	
-	Complete ONLY if direct	<u>ر</u>	candidate/Officeholder name C	)ffice sou	aht		Office held
	expenditure to benefit C/Oł				y		0
⊢							
1							

		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     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense       bornitite     Legal Services       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)				
1	Total pages Schedule F1:		<b>3</b> Filer ID (Ethics Commission Filers)				
-	Sch: 7/20 Rpt: 12/25	Phillips, Fredericka M. (The Honorable)	00066411				
4	Date 09/30/2024	Payee name HEB					
6	Amount (\$) \$88.08	<ul> <li>Payee address; City; State; Zip Code</li> <li>12680 W Lake Houston</li> <li>Houston, TX 77044</li> </ul>					
8	PURPOSE OF EXPENDITURE	Food/Beverage Expense					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	10/13/2024	HEB					
	Amount (\$) \$149.21	Payee address; City; State; Zip Code 12680 W Lake Houston Houston, TX 77044					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense OplieS				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	10/13/2024	HEB					
	Amount (\$) \$28.70	Payee address;City;State;ZipCode12680 W Lake Houston					
		Houston, TX 77044					
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense Oplies				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	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 mittee Legal Services The Instruction Guide exp		Office Over Polling Exp Printing Exp Salaries/Wa	ense ges/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: 8/20 Rpt: 13/25		Phillips, Fredericka M. (The Hono	rable)				00066411			
4	Date 10/16/2024		Payee name HEB								
6	Amount (\$) \$144.58		Payee address; City; State; Zip Code 12680 W Lake Houston Houston, TX 77044								
8	PURPOSE OF EXPENDITURE	OF Event Expense									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Of	ffice soug	ht		Office held			
	Date		Payee name								
	10/20/2024		HEB								
	Amount (\$) \$81.64		Payee address; City; 12680 W Lake Houston Houston, TX 77044	State;	Zip Coc	e					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of Office Overhead/Rental Expense	this schec	dule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Of	ffice soug	ht		Office held			
	Date		Payee name								
	10/23/2024		HEB								
	Amount (\$) \$85.41		Payee address; City; 12680 W Lake Houston	State;	Zip Coc	e					
			Houston, TX 77044								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of Event Expense	this schec	dule)		n, TX,	ide of Texas. Complete Schedule T. K, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Of	ffice 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		Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Office Over Polling Exp Printing Exp Salaries/Wa	ense 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	Tatal pages Cabadula F1		· · · · ·			1	Filer ID (Ethics Commission Filers)				
1	Total pages Schedule F1: Sch: 9/20 Rpt: 14/25		Phillips, Fredericka M. (The Honorable)			3	Filer ID       (Ethics Commission Filers)         00066411				
4	Date	5	Payee name								
	10/24/2024		Hilton Avenida								
6	Amount (\$) \$29.23		7 Payee address; City; State; Zip Code 1600 Lamar Houston, TX 77010								
8	PURPOSE	(a)	Catagony		b) Description						
Ū	OF	Travel In District									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name Of	ffice soug	ht		Office held				
	Date		Payee name								
	10/05/2024		Home Depot								
	Amount (\$)		Payee address; City; State;	Zip Coo	e						
	\$148.59										
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sched Office Overhead/Rental Expense	dule)		n, TX	de of Texas. Complete Schedule T. officeholder living expense ieS				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name Of	ffice soug	ht		Office held				
	Date		Payee name								
	10/08/2024		Houston Airport System								
	Amount (\$)		Payee address; City; State;	Zip Coo	e						
	\$26.30		2800 N Terminal Rd								
			Houston, TX 77032								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sched Travel In District	dule)		n, TX,	de of Texas. Complete Schedule T. . officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Of	ffice 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						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: 10/20 Rpt: 15/25		Phillips, Fredericka M. (The Honorable)	)			00066411		
4	Date	5	Payee name						
	10/03/2024		Houston Bar Foundation						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le				
	\$520.00		1111 Bagby						
			Houston, TX 77002						
8	PURPOSE				(b) Description				
ľ	OF	(a)	Category (See Categories listed at the top of this sche Event Expense	edule)	(b) Description Check if travel	outs	ide of Texas. Complete Schedule T.		
	EXPENDITURE		Lvent Expense				, officeholder living expense		
					event sponso	or			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name O	office soug	ht		Office held		
	Date		Payee name						
	10/13/2024		Houston Black American Democrats						
	Amount (\$)		Payee address; City; State;	Zip Co	le				
	\$250.00		5300 Griggs						
	+_00.00								
			Houston, TX 77021						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Contributions/Donations Made By				ide of Texas. Complete Schedule T. , officeholder living expense		
			Candidate/Officeholder/Political Commi	ittee	donation	, IX	, officenoider living expense		
					donation				
	Complete ONLY if direct		Candidate/Officeholder name O	office soug	.bt		Office held		
	expenditure to benefit C/OI			nice soul	hit		Once held		
_		-							
	Date		Payee name						
	10/20/2024		Houston Children's Charity						
	Amount (\$)		Payee address; City; State;	Zip Co	le				
	\$255.58		1600 W Loop S						
			Ste 610						
			Houston, TX 77027						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF		Contributions/Donations Made By	Julioj		outs	ide of Texas. Complete Schedule T.		
	EXPENDITURE		Candidate/Officeholder/Political Commi	ittee			, officeholder living expense		
					donation plus	s pr	rocessing fee		
	Complete ONLY if direct		Candidate/Officeholder name O	office soug	ht	_	Office held		
	expenditure to benefit C/OH								

	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 h	Office Ove Polling Exp Printing Ex Salaries/W	kpense /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: 11/20 Rpt: 16/25		Phillips, Fredericka M. (The Honorable)	)			00066411		
4	Date	5	Payee name			_			
	10/23/2024		Houston Children's Charity						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de				
	\$250.00		1600 W Loop S						
			Ste 610						
			Houston, TX 77027						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Contributions/Donations Made By				ide of Texas. Complete Schedule T.		
			Candidate/Officeholder/Political Commi	ittee	donation	tin, TX	, officeholder living expense		
					donation				
9	9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH								
	Date		Payee name						
	10/11/2024		Mailchimp						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$57.56 675 Ponce De Leon Ave NE								
			Atlanta, GA 30308						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Advertising Expense	edule)		tin, TX	ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name O	office sou	ght		Office held		
	Date		Payee name						
	10/20/2024		Marcos Pizza						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$129.55		12712 W Lake Houston Pkwy						
			Houston, TX 77044						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description	al auta	ide of Toylog, Complete Cohedule T		
	EXPENDITURE		Food/Beverage Expense			tin, TX	ide of Texas. Complete Schedule T. , officeholder living expense ISOI		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O	office sou	ght		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 Imittee 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: 12/20 Rpt: 17/25		Phillips, Fredericka M. (The Honorable)	)			00066411		
4	Date	5	Payee name						
	10/01/2024		Pappadeaux Seafood Kitchen						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de				
	\$130.36		1001 Avenida de las Americas						
			Houston, TX 77010						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Food/Beverage Expense	uuic)		outs	ide of Texas. Complete Schedule T.		
	EXPENDITORE						, officeholder living expense		
					campaign me	eeti	ng		
_			And the second						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice sou	gnt		Office held		
_	Date								
	10/24/2024		Payee name Pappadeaux Seafood Kitchen						
	Amount (\$)			Zip Co	de				
	\$61.91		1001 Avenida de las Americas						
			Houston, TX 77010						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Food/Beverage Expense				ide of Texas. Complete Schedule T. , officeholder living expense		
					campaign dir				
					oampaign an				
	Complete ONLY if direct	<u>с</u>	andidate/Officeholder name O	ffice sou	ght		Office held		
	expenditure to benefit C/OI	Н							
	Date		Payee name						
	10/17/2024		Print N Sign						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$514.18		7350 Harwin Dr						
			Ste 316A						
			Houston, TX 77036						
-	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Advertising Expense	,aalo)		outs	ide of Texas. Complete Schedule T.		
	EXPENDITORE					, TX	, officeholder living expense		
					push cards				
	Complete ONIL V if direct	L	andidate/Officeholder some	ffice	sht .		Office hold		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice sou	JIIL		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 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: 13/20 Rpt: 18/25		Phillips, Fredericka M. (The Honorable)	)			00066411			
4	Date	5	Payee name							
	10/11/2024		Royal Sonesta							
6	Amount (\$)	7		Zip Co	de					
	\$18.00		2222 West Loop S							
			Houston, TX 77027							
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	EXPENDITURE		Event Expense				ide of Texas. Complete Schedule T. , officeholder living expense			
					gala parking	, 17				
					3					
9 Complete ONLY if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office sought       Office held										
	Date		Payee name							
	10/06/2024		Sisters United Alliance							
⊢	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$100.00 13527 N Tracewood Blvd									
			Houston, TX 77077							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Commi	ittoo			ide of Texas. Complete Schedule T. , officeholder living expense			
				lillee		donation				
⊢	Complete ONLY if direct		Candidate/Officeholder name O	)ffice sou	aht		Office held			
	expenditure to benefit C/OI	Η		·						
	Date		Payee name							
	10/03/2024		St Mary's of the Purification Church							
	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$550.00		3006 Rosedale							
			Houston, TX 77004							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	EXPENDITURE		Event Expense				ide of Texas. Complete Schedule T. , officeholder living expense			
							annual festival			
					Soon space	101				
-	Complete ONLY if direct	Ľ	Candidate/Officeholder name O	office sou	ht		Office held			
	expenditure to benefit C/OI			111CE 20U	jiit		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 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: 14/20 Rpt: 19/25	2	Phillips, Fredericka M. (The Honorable)	)		5	00066411					
4	Date 10/07/2024	5	Payee name Steak 48									
6	Amount (\$) \$12.00	7	Payee address; City; State; Zip Code 4444 Westheimer Rd Houston, TX 77027									
8	PURPOSE OF EXPENDITURE	OF Sevent Expense										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ht		Office held					
	Date		Payee name									
	10/19/2024		Taco Bell									
	Amount (\$) \$10.80	Payee address;City;State;Zip Code.8014329 E Sam Houston Pkwy N										
	DUDDOOF		Houston, TX 77044		(1-)							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense					
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name O	)ffice sou	ht		Office held					
	Date		Payee name									
	10/10/2024		The Ritz-Carlton, Dallas									
	Amount (\$) \$2,359.59		Payee address; City; State; 2121 McKinney Ave	Zip Co	le							
			Dallas, TX 75201									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Travel Out of District	edule)		, TX,	de of Texas. Complete Schedule T. , officeholder living expense ent					
	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/R Fees Office Overhead/R Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Co The Instruction Guide explains how to complete	ental Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Intract Labor OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)						
	Sch: 15/20 Rpt: 20/25	Phillips, Fredericka M. (The Honorable)	00066411						
4	Date 10/01/2024	Payee name Tiffs Treats							
6	Amount (\$) \$113.88	Payee address; City; State; Zip Code 3800 Southwest Frwy							
		Houston, TX 77027							
8	PURPOSE OF EXPENDITURE	OF Ecod/Beverage Expense							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	andidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	10/15/2024	Tiffs Treats							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$93.59	3800 Southwest Frwy							
		Houston, TX 77027							
	PURPOSE OF EXPENDITURE	Food/Beverage Expense	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ry snacks						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	10/21/2024	Tiffs Treats							
	Amount (\$) \$93.59	Payee address; City; State; Zip Code 3800 Southwest Frwy							
		Houston, TX 77027							
	PURPOSE OF EXPENDITURE	Food/Beverage Expense	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense aff and jury snacks						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	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 h	Office Over 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	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 16/20 Rpt: 21/25		Phillips, Fredericka M. (The Honorable)	)		00066411					
4	Date 10/17/2024		Payee name Two Houston Center								
6	Amount (\$) \$9.00	7 Payee address;       City;       State; Zip Code         \$9.00       909 Fannin         Houston, TX 77010									
8	B       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel In District       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T.       Image: Check if Austin, TX, officeholder living expense parking										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	office sou	ht		Office held				
	Date		Payee name								
	10/15/2024		US Post Office								
	Amount (\$) \$63.00		Payee address; City; State; 7205 Almeda	Zip Coo	le						
	DUDDOGE	<u> </u>	Houston, TX 77054								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Office Overhead/Rental Expense	edule)		, TX,	de of Texas. Complete Schedule T. , officeholder living expense enewal				
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name O	office sou	ht		Office held				
	Date		Payee name								
	10/08/2024		Uber								
	Amount (\$) \$154.98	I	Payee address; City; State; 1455 Market St	Zip Co	le						
			San Francisco, CA 94103								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel Out of District	edule)	Check if Austir	I, TX	de of Texas. Complete Schedule T. officeholder living expense irport to hotel				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/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		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:		Filer ID (Ethics Commission Filers)							
	Sch: 17/20 Rpt: 22/25	Phillips, Fredericka M. (The Honorable)	00066411							
4	Date	5 Payee name								
	10/09/2024	Uber								
6	Amount (\$) \$19.00	Payee address; City; State; Zip Code 1455 Market St								
		San Francisco, CA 94103								
8	PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Travel Out of District       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense rideshare to event									
9     Complete ONLY if direct     Candidate/Officeholder name     Office sought     Office held       expenditure to benefit C/OH     Office name     Office sought     Office held										
	Date	Payee name								
	10/09/2024	Uber								
	Amount (\$) \$18.00	Payee address; City; State; Zip Code 1455 Market St								
	PURPOSE	San Francisco, CA 94103								
	OF EXPENDITURE		side of Texas. Complete Schedule T. K, officeholder living expense ent							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	10/09/2024	Uber								
	Amount (\$) \$43.81	Payee address; City; State; Zip Code 1455 Market St								
		San Francisco, CA 94103								
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense rideshare								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	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 Exp ee Legal Services The Instruction Guide		Office Overl Polling Expe Printing Exp Salaries/Wa	ense ges/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 FIL	FILER NAME 3 Filer ID (Ethics Commission							
	Sch: 18/20 Rpt: 23/25		illips, Fredericka M. (The H	onorable	)			00066411		
4	Date 10/10/2024	5 Pay Ub	/ee name er							
6	Amount (\$) \$130.23	7       Payee address; City; State; Zip Code         30.23       1455 Market St         San Francisco, CA 94103								
8	PURPOSE OF EXPENDITURE	OF Travel Out of District								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		lidate/Officeholder name	C	Office soug	ht		Office held		
	Date	Pay	/ee name							
	10/14/2024	Un	iversity of Houston							
	Amount (\$) \$10.00	-	vee address; City; 00 University Dr	State;	Zip Cod	e				
		Но	uston, TX 77004							
	PURPOSE OF EXPENDITURE		egory (See Categories listed at the t ent Expense	op of this sche	edule) (			ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OF		lidate/Officeholder name	C	Office soug	ht		Office held		
	Date	Pa	/ee name							
	10/13/2024	We	est Houston Democrats							
	Amount (\$) \$150.00		vee address; City; 114 Waldemere Dr	State;	; Zip Cod	e				
		Но	uston, TX 77077							
	PURPOSE OF EXPENDITURE	Co	egory (See Categories listed at the t ntributions/Donations Made ndidate/Officeholder/Politic	e By			ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		lidate/Officeholder name	C	Office 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	/ - Il Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee 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	· · · · ·		•	3	Filer ID (Ethics Commission Filers)		
_	Sch: 19/20 Rpt: 24/25	-	Phillips, Fredericka M. (The Honorable)	00066411					
4	Date	5	Payee name						
	09/27/2024		paypal						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le				
	\$3.38		2221 North First St						
			San Jose, CA 95131						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF		Fees	Judio)		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE						, officeholder living expense		
					online donati	on	processing fee		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name O	office sou	Jht		Office held		
	Date		Payee name						
	09/30/2024		paypal						
	Amount (\$)		Payee address; City; State;	Zip Co	le				
	\$72.74		2221 North First St						
	¢12.11								
			San Jose, CA 95131						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Fees	edule)	Check if Austin	, тх	ide of Texas. Complete Schedule T. , officeholder living expense processing fees		
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name O	)ffice sou	Jht		Office held		
	Date		Payee name						
	10/08/2024		paypal						
-	Amount (\$)		Payee address; City; State;	Zip Co	le				
	\$14.94		2221 North First St	2.6 00					
	\$1 NO 1								
			San Jose, CA 95131						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	EXPENDITURE		Fees				ide of Texas. Complete Schedule T.		
							, officeholder living expense		
					unine uunali		processing fee		
	0 1 1 0 11 1 1								
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	jht		Office held		
⊢									