JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	n Guide explains how to complete t	his form. 1 Filer ID (Ethics Comr 0008413	nission Filers) 8	2 Total pages fi	led: L4
3 CANDIDATE /	MS / MRS / MR FIR	ST	MI		USE ONLY
OFFICEHOLDER NAME	The Honorable Jera	alynn C.		Date Received	
				ELECTRONIC	ALLY FILED
	NICKNAME LAS	 Т	SUFFIX	10/28/2024	
	Mai	nor			
4 CANDIDATE / OFFICEHOLDER MAILING	ADDRESS / PO BOX; APT / SUI	TE #; CITY;	ZIP CODE	Date Hand-delivered o	
ADDRESS	REDACTED PER 254.0313	3, GOV'T CODE		Receipt #	Amount
Change of Address				Date Processed	
				Date Imaged	
5 CAMPAIGN	MS / MRS / MR FIRS	ST		MI	
TREASURER NAME	Ms. Nata	alia			
	NICKNAME LAS	т		SUFFIX	
	Cru:			JUFFIA	
6 CAMPAIGN	STREET ADDRESS (NO PO BOX	PLEASE) AF	PT / SUITE #; CITY;	ST	ATE; ZIP CODE
TREASURER	STREET ADDRESS (NOT O DOX		1730HL#, 0HT,	317	
(Residence or Business)	REDACTED PER 254.0313	3, GOV'T CODE			
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NU (915) 346-6644	IMBER EXTENSION			
8 REPORT TYPE	January 15 30	Oth day before election	Runoff	15th day after ca	mpaign treasurer
			Kulon	appointment (offi	
	July 15 X 8t	h day before election	Exceeded modified reporting limit	Final Report (Atta	ach C/OH-FR)
9 PERIOD	Month Day Year		Month Day	Year	
COVERED	09/27/2024	THROUGH	10/26/202	4	
10 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month Day Year	Primary	Runoff	Other	
	11/05/2024	XGeneral	Special		
11 OFFICE	OFFICE HELD (if any)	1	12 OFFICE SOUGHT	(if known)	
	District Judge District 80 Harris		District Judge Dis		
	1				
		GO TO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.ethics.state.tx.	us	Vers	ion V4.1.0.48da51f

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 14

I

13 C / OH NAME	Manor, Jeralynn C. (The Honorable)	14 Filer ID 00084138	(Ethics Commission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expen These expenditures may have been made without d officeholders are required to report this information	ut the candidate's or offic	ceholder's knowledge or			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
	GENERAL	COMMITTEE ADDRESS					
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER NAME	E				
		COMMITTEE CAMPAIGN TREASURER ADDP	RESS				
16 CONTRIBUTION	1. TOTAL UNITEM	IZED POLITICAL CONTRIBUTIONS(OTHER TH					
TOTALS		ES OF LOANS, OR CONTRIBUTIONS MADE E		\$ 0.00			
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOA		\$ 1,430.00			
EXPENDITURE TOTALS		IZED POLITICAL EXPENDITURES	4113)	\$ 0.00			
	4. TOTAL POLIT	ICAL EXPENDITURES	\$ 43,308.80				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		L CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS . TING PERIOD	AS OF THE LAST DAY	\$ 0.00			
17 AFFIDAVIT							
		I swear, or affirm, under pen true and correct and include under Title 15, Election Cod	s all information required	ccompanying report is to be reported by me			
			norable Jeralynn C. Ma				
		Signature	e of Candidate or Officeh	older			
AFFIX NC	DTARY STAMP / SEAL AB	OVE					
		aid	, this the	day			
of	, 20, to c	ertify which, witness my hand and seal of office.					
Signature of off	icer administering oath	Printed name of officer administering oath	Title of offic	er 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 14

18 FILER NAME	(Ethics Commission Filers)	
Manor, Jeralynn C. (The Honorable)	00084138	1
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. X SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 1,430.00	
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	\$ 43,308.80
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	ONS	\$
12. X SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$ 8.44

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: 1/1 Rpt: 4/14	
2 FILER NAME Manor, Jeral	ynn C. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084138	
4 Date 10/21/2024	 5 Full name of contributor out-of-state PAC (ID#: Amos, Ahaji 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$1,000.00
	Houston, TX 77002		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	•
Attorney		Principal	
10 Contributor's e		11 Law firm of contributor's sp	bouse (if any)
Ahaji Amos F			
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/27/2024	Goldberg, Daniel		\$180.00
	Contributor address; City; State; Zip Code Houston, TX 77004		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Principal	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
The Goldber	g Law Office PLLC		
If contributor is	s a child, law firm of parent(s) (if any)		
Date 10/23/2024			Amount of Contribution (\$) \$250.00
	Tomball, TX 77375		
Contributor's F	Principal Occupation	Contributor's Job Title	1
Attorney		Attorney	
Contributor's e	mployer/law firm	bouse (if any)	
Mundy and A	Associates, PLLC		
If contributor is	s a child, law firm of parent(s) (if any)		
	by Texas Ethics Commission www.ethic	s state ty 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	/ - 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 Exp 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: 1/9 Rpt: 5/14		Manor, Jeralynn C. (The Honorable)				00084138
4	Date	5	Payee name				
	10/25/2024		Aceves Communications				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de		
	\$4,000.00		PO Box 6514				
			Houston, TX 77265				
8	PURPOSE				(b) Decoription		
ľ	OF	(a)	Category (See Categories listed at the top of this sche Consulting Expense	edule)	(b) Description	outsi	ide of Texas. Complete Schedule T.
	EXPENDITURE						, officeholder living expense
					General Con	sult	ting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice sou	ght		Office held
	Date		Payee name				
	10/21/2024		Allied Signs				
	Amount (\$)		-	Zip Co	de		
	\$1,085.00		6820 Harwin Dr.	p 00			
	\$1,000.00						
			Houston, TX 77036				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	EXPENDITURE		Printing Expense				ide of Texas. Complete Schedule T. , officeholder living expense
							paign Materials
						····r	
-	Complete ONLY if direct		Candidate/Officeholder name O	office sou	nht		Office held
	expenditure to benefit C/Oł				5		
_	Data	1					
	Date		Payee name				
	10/04/2024		Allied Signs				
	Amount (\$)			Zip Co	de		
	\$8,834.99		6820 Harwin Dr.				
			Houston, TX 77036				
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Printing Expense				ide of Texas. Complete Schedule T.
							, officeholder living expense
					Signs and Ca	unp	paign Materials
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ght		Office held
	experiatore to benefit C/O	•					

	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 Ex Legal Services The Instruction Guid		Office Overh Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Travel in District Travel Out of Dist	uipment & Related Expense
1	Total pages Schedule F1:	2 FILF					3	Filer ID	(Ethics Commission Filers)
-	Sch: 2/9 Rpt: 6/14		or, Jeralynn C. (The Hond	orable)				00084138	
4	Date 10/15/2024	,	e name 5 Democrats						
6	Amount (\$)			Stata	Zip Cod				
0	\$250.00	-	e address; City; Box 608	State,	, Zip Cou	5			
		Pasa	adena, TX 77501						
8	PURPOSE OF		gory (See Categories listed at the		edule) (b) Description			
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee General Election Contribution					expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candio	late/Officeholder name	С	Dffice soug	nt		Office he	ld
	Date	Paye	e name						
	10/02/2024	Aubi	ey Taylor Communication	ns					
	Amount (\$)	Paye	e address; City;	State;	; Zip Cod	e			
	\$5,000.00	957	Nasa Parkway						
		#251							
		Hou	ston, TX 77058						
	PURPOSE OF EXPENDITURE	a) Cate	gory (See Categories listed at the lertising Expense	top of this sch	edule) (n, TX,	de of Texas. Comp officeholder living ertising	
	Complete ONLY if direct expenditure to benefit C/OF	Candio	late/Officeholder name	C	Dffice soug	nt		Office he	ld
	Date	Paye	e name						
	10/15/2024		Area Democratic Movem	ent					
	Amount (\$)	Paye	e address; City;	State;	; Zip Cod	e			
	\$250.00	PO	Box 590383						
		Hou	ston, TX 77259						
	PURPOSE OF		OORY (See Categories listed at the		edule)	b) Description		da a(Tau - C	lete Och et de T
	EXPENDITURE		ributions/Donations Mad didate/Officeholder/Politic		iittee		n, TX,	de of Texas. Comp officeholder living Donation	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candio	late/Officeholder name	C	Office soug	nt		Office he	ld

	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: 3/9 Rpt: 7/14		Manor, Jeralynn C. (The Honorable)				00084138
4	Date	5	Payee name			-	
	10/15/2024		Bayou Blue Democrats				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le		
	\$250.00		4619 Lyons Ave.				
			-				
			Houston, TX 77020				
8	PURPOSE	(a)			(b) Description		
	OF	1,	Category (See Categories listed at the top of this sche Contributions/Donations Made By	edule)		outsi	ide of Texas. Complete Schedule T.
	EXPENDITURE		Candidate/Officeholder/Political Commi	ittee			, officeholder living expense
					General Elec	tior	n Contribution
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice sou	ht		Office held
	Date	Γ	Payee name				
	09/30/2024		Crawford Dunn, Sherry				
	Amount (\$)	⊢	Payee address; City; State;	Zip Co	le		
	\$275.00		20131 US-59				
	Ψ <u></u> Γ 0100		20101 00 00				
			Humble, TX 77338				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Salaries/Wages/Contract Labor	edule)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense tion Planning
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice sou	ht		Office held
	Date	Γ	Payee name				
	10/26/2024		Donor Box				
-	Amount (\$)		Payee address; City; State;	Zip Co	le		
	\$67.40		53rd St.	p 000			
	φ01.40		Suite 900				
			San Francisco, CA 94103				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	EXPENDITURE		Fees		Check if Austin	, TX,	ide of Texas. Complete Schedule T. , officeholder living expense Cessing Fees 09/27-10/26/2024
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice 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:		3 Filer ID (Ethics Commission Filers)
-	Sch: 4/9 Rpt: 8/14	Manor, Jeralynn C. (The Honorable)	00084138
4	Date 09/30/2024	5 Payee name EnElle Makeup	
6	Amount (\$) \$150.00	7 Payee address; City; State; Zip Code 2802 Ruth St Houston, TX 77004	
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense campaign Photography
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	10/17/2024	Hall, Terrance	
	Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 6011 West Orem Dr	
		Houston, TX 77085	
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense Coverage
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	10/18/2024	Horn, Wanda	
	Amount (\$) \$735.00	Payee address; City; State; Zip Code 2211 34th Ave N Apt 1212 Texas City, TX 77590	
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense Coverage
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment								
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)							
Sch: 5/9 Rpt: 9/14	Manor, Jeralynn C. (The Honorable) 00084138							
4 Date	5 Payee name							
10/21/2024	J&N Enterprises							
6 Amount (\$)	7 Payee address; City; State; Zip Code							
\$4,376.95	2519 Fairway Park Dr							
	Suite 302							
	Houston, TX 77092							
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.							
	Check if Austin, TX, officeholder living expense							
	Direct Mailer							
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
Date	Payee name							
10/15/2024	Meyerland Area Democrats Club							
Amount (\$)	Payee address; City; State; Zip Code							
.,								
\$250.00	PO Box 3100061							
	Houston, TX 77231							
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Contributions/Donations Made By							
_/: _:	Candidate/Officeholder/Political Committee							
	General Election Donation							
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
expenditure to benefit C/O	-							
Date	Payee name							
10/17/2024	Michel, Bryant							
Amount (\$)	Payee address; City; State; Zip Code							
\$2,080.00	3307 Deeds Rd							
	Houston, TX 77084							
PURPOSE								
OF	(a) Category (See Categories listed at the top of this schedule) Salaries (Mages / Contract Labor							
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
	Election Poll Coverage							
Complete ONUN if dire -t	Condidate/Officeholder name Office courset							
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Comr	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	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	Total pages Schedule F1:	2 F				3	Filer ID (Ethics Commission Filers)
	Sch: 6/9 Rpt: 10/14		Aanor, Jeralynn C. (The Honorable)				00084138
4	Date 09/30/2024		Payee name Pappas Delivery				
6	Amount (\$) \$3,371.64	F	Payee address; City; State; P.O. Box 41567 Houston, TX 77241	Zip Coo	e		
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 Staff Office Catering					officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	ffice soug	ht		Office held
	Date	F	Payee name				
	10/18/2024	F	Pleasant Hill Baptist Church				
	Amount (\$) \$1,000.00		Payee address; City; State; 510 Pannell Street	Zip Coo	e		
		ŀ	louston, TX 77020				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Contributions/Donations Made By Candidate/Officeholder/Political Commi			, TX,	de of Texas. Complete Schedule T. officeholder living expense ponsorship
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	ffice soug	ht		Office held
	Date	F	Payee name				
	10/11/2024	F	Ritz Carlton				
	Amount (\$) \$2,359.00		Payee address; City; State; 2121 McKinney Ave	Zip Coo	e		
			Dallas, TX 75201				
	PURPOSE OF EXPENDITURE		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 ging
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	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	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Committee 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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 7/9 Rpt: 11/14	Manor, Jeralynn C. (The Honorable)	00084138				
4	Date 10/01/2024	Payee name Run Sister Run PAC					
6	Amount (\$) \$250.00	Payee address; City; State; Zip Code P.O. Box 66470 Houston, TX 77266					
8	PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	utside of Texas. Complete Schedule T. TX, officeholder living expense on Contribution				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	10/24/2024	Sanchez, Andy					
	Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 201 Caroline					
		Houston, TX 77002					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense nt				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	10/18/2024	Scott , Lashelle (Ms.)					
	Amount (\$) \$250.00	Payee address;City;State;Zip Code3600 W Sam Houston Pkwy S					
		Houston, TX 77042					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, 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/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District By - Gift/Awards/Memorials Expense Printing Expense Travel Out of District	quipment & Related Expense					
1	Total pages Schedule F1:	: 2 FILER NAME 3 Filer ID	(Ethics Commission Filers)					
	Sch: 8/9 Rpt: 12/14	Manor, Jeralynn C. (The Honorable) 00084138						
4	Date	5 Payee name						
	10/23/2024	Scott , Lashelle (Ms.)						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$400.00	3600 W Sam Houston Pkwy S						
		Houston, TX 77042						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Salaries/Wages/Contract Labor	blete Schedule T.					
		Check if Austin, TX, officeholder living	expense					
		Outreach						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office he OH	IO					
	Date	Payee name						
	10/17/2024	Smith, John (Mr.)						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$735.00	6105 W Orem Dr						
		Apt 319						
		Houston, TX 77085						
	PURPOSE							
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description	plete Schedule T.					
	EXPENDITURE	Check if Austin, TX, officeholder living	expense					
		Election Poll Coverage						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office he OH	ld					
-	Date	Payee name						
	10/15/2024	Southwest Democrat						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$250.00							
		Bellaire, TX 77402						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Contributions/Donations Made By						
		Candidate/Officeholder/Political Committee General Election Contribution						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office he	ld					
	expenditure to benefit C/OF		iu.					
-								

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: 9/9 Rpt: 13/14	Manor, Jeralynn C. (The Honorable)	00084138							
4	Date 10/18/2024	5 Payee name Stelly, Pam (Ms.)								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$3,000.00	13218 Boyer Ln Houston Houston, TX 77015								
0	DUDDOSE									
8	PURPOSE OF EXPENDITURE		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Election Poll Coverage							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	10/12/2024	Thumbtack								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$250.00	415 Natoma Street								
		Suite 1300								
		San Francisco, CA 94103-1337								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ce for Campaign Materials							
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH									
	Date	Payee name								
	10/04/2024	Velvet Taco								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$338.82 4819 Washington Ave									
		Houston, TX 77007								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instru	cti		ages Schedule K: ./1 Rpt: 14/14		
2 FILER NAME 3 Filer I						O (Ethics Commission Filers)
	Manor, Jeralynn C. (The Honorable)				00084	138
4	Date	5	Name of person from whom amount is received			8 Amount (\$)
	10/10/2024		Frosts Bank			\$8.44
		6	Address of person from whom amount is received; City; State; Zip Code			
			Houston, TX 77025			
		7		politio	cal cont	ribution returned to filer
			Monthly Interest Dividend			