FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00015721 3 COMMITTEE NAME **OFFICE USE ONLY BracewellPAC** Date Received **ELECTRONICALLY FILED** 01/06/2025 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 711 Louisiana, Ste. 2300 Change of Address Houston, TX 77002-2781 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Ms. Patricia H. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Adams CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 711 Louisiana St. STREET **ADDRESS** Ste. 2300 (Residence or Business) Houston, TX 77002-2781 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 711 Louisiana St. MAILING **ADDRESS** Ste. 2300 Change of Address Houston, TX 77002-2781 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (713) 221-1593 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY X January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 11/26/2024 12/25/2024 **GO TO PAGE 2**

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME		:	13 Filer ID	(Ethics Commission Filers)
BracewellPAC			00015721	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this		B. Opposed		
report if necessary.)				
	2. Measures	A. Supported		
	(Describe by date and location of election and nature of issue.)			
		B. Opposed		
	Officeholders Assisted (Identify by name or, if	The Honorable David Gunn Co	ourt Of Appe	als, Justice
	applicable, classify by party.)			
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA		\$	
	(OTHER THAN PLE	DGES, LOANS, OR GUARANTEES OF LOANS)		0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	27,500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	3,265.38
OUTSTANDING LOAN TOTALS	•	AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
6 AFFIDAVIT	L			
		I swear, or affirm, under penalty of per true and correct and includes all inform under Title 15, Election Code.	jury, that the a	accompanying report is d to be reported by me
		Mc Patrici	a H. Adams	
		Signature of Can		ırer
AFFIX NOTA	RY STAMP / SEAL ABOVE	3 g		
Covere to and subscribe	ad hafaya waa lay sha aaid	al-	io do o	day
		, th which, witness my hand and seal of office.	is the	day
01		which, withess my hand and sear of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of office	cer administering oath
	-	-		-

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13 Filer ID (Ethics Commission Filers)
00015721
•
shley Simmons State Representative
axton State Senator
ichols State Senator
chols State Senator

					Page 4 of 14
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
BracewellPAC				00015721	
14 COMMITTEE ACTIVITY (Attach lists on plain	Candidates (Identify by name or, if applicable, classify by party.)				
paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Sen. Judith Zaffirini State Senat	or	
COMMITTEE	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		The Honorable Katy Boatman C	ourt Of Appeal	s, Justice
COMMITTEE	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if		The Honorable Jennifer Caughe	y Court Of App	peals, Justice
	applicable, classify by party.)				

	5721
1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Identify by name or, if applicable, classify by party.) B. Opposed The Honorable Clint Morgan Court Of Applicable, classify by party.) B. Opposed The Honorable Clint Morgan Court of Applicable, classify by party.) B. Opposed B. Opposed B. Opposed B. Opposed	
ACTIVITY (Attach lists on plain paper to complete this report if necessary.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed A. Supported Describe by date and location of election and nature of issue.) B. Opposed The Honorable Maritza Antu Court Of Applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) A. Supported The Honorable Clint Morgan Court Of Applicable, classify by party.) A. Supported The Honorable Clint Morgan Court Of Applicable, classify by party.) A. Supported The Honorable Clint Morgan Court Of Applicable, classify by party.) B. Opposed A. Supported The Honorable Clint Morgan Court Of Applicable, classify by party.) A. Supported Describe by date and location of election and location of election and nature of issue.) B. Opposed	peals, Justice
2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) A. Supported The Honorable Maritza Antu Court Of Applicable, classify by party.) A. Supported The Honorable Clint Morgan Court Of Applicable, classify by party.) A. Supported The Honorable Clint Morgan Court Of Applicable, classify by party.) A. Supported The Honorable Clint Morgan Court Of Applicable, classify by party.) A. Supported The Honorable Clint Morgan Court Of Applicable, classify by party.) A. Supported B. Opposed B. Opposed B. Opposed	peals, Justice
(Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) A. Supported B. Opposed The Honorable Clint Morgan Court Of Applicable, classify by party.) B. Opposed A. Supported B. Opposed B. Opposed B. Opposed	peals, Justice
COMMITTEE ACTIVITY	peals, Justice
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed A. Supported The Honorable Clint Morgan Court Of Applicable, Classify by party.) B. Opposed A. Supported B. Opposed B. Opposed	peals, Justice
Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) A. Supported The Honorable Clint Morgan Court Of Applicable, classify by party.) B. Opposed A. Supported B. Opposed B. Opposed B. Opposed	peals, Justice
ACTIVITY (Attach lists on plain paper to complete this report if necessary.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed B. Opposed B. Opposed B. Opposed	
ACTIVITY (Attach lists on plain paper to complete this report if necessary.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed B. Opposed B. Opposed	neals, Justice
paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) A. Supported B. Opposed	pound, outside
(Describe by date and location of election and nature of issue.) B. Opposed	
3 Officeholders	
Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) A. Supported The Honorable Chad Bridges Court Of A	ppeals, Justice
(Attach lists on plain paper to complete this report if necessary.) B. Opposed	
Measures (Describe by date and location of election and nature of issue.) A. Supported	
B. Opposed	
3. Officeholders Assisted	
(Identify by name or, if applicable, classify by party.)	

					Page 6 of 14
L2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
BracewellPAC				00015721	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	Measures (Describe by date and	A. Supported			
	location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		The Honorable Brad Hart Court	Of Appeals, Ju	stice
COMMITTEE	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Amy Peck Houston City Council		
COMMITTEE	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if		Joaquin Martinez Houston City (Council	
	applicable, classify by party.)				

					ī	Page 7 of 14
L2 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
BracewellPAC					00015721	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)					
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures	A. Supported				
	(Describe by date and location of election and nature of issue.)					
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if		Julian Ramirez	Houston City Co	puncil	
	applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or if	A. Supported				
	(Identify by name or, if applicable, classify by party.)					
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Letitia Plummer	Houston City Co	ouncil	
COMMITTEE	Candidates	A. Supported				
ACTIVITY	(Identify by name or, if applicable, classify by party.)					
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if		Sallie Alcorn Ho	ouston City Cour	ncil	
	applicable, classify by party.)					

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

			8 of 14
17 COMMITT	EE NAME	18 Filer ID	(Ethics Commission Filers)
Bracewe		00015721	(
l	LE SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION)R	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$
9.	SCHEDULE E: LOANS		\$
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 27,500.00
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/6 Rpt: 9/14	BracewellPAC 00015721
4 Date	5 Payee name
12/18/2024	Amy Peck Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	7941 Katy Freeway, #108
Expenditure from corporate funds	Houston, TX 77024
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Political Contribution, Amy Peck, Houston City Council
	Council
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/02/2024	Angela Paxton Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 2878
\$1,000.00	P.O. BOX 2070
Expenditure from	
corporate funds	McKinney, TX 75070
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Political Contribution, Angela Paxton, Texas State
	Senator
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experialiture to beliefit C/O	
Date	Payee name
12/09/2024	Brad Hart Campaign
	· ·
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	12654 Memorial Drive
	Suite F1 #721
Expenditure from corporate funds	Houston, TX 77024
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Political contribution, Brad Hart, Justice, 14th Court
	of Appeals
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 Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 2/6 Rpt: 10/14	2 FILER NAME BracewellPAC 3 Filer ID (Ethics Commission Filers) 00015721
4 Date 12/09/2024	5 Payee name Chad Bridges Campaign
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 310 Morton St. No. 268
Expenditure from corporate funds	Houston, TX 77469
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 12/09/2024	Payee name Clint Morgan Campaign
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 3536 Highway 6
Expenditure from corporate funds	#231 Sugar Land, TX 77478
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Political contribution, Clint Morgan, Justice, 1st Court of Appeals
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 11/27/2024	Payee name David Gunn Campaign
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code P.O. Box 684281
Expenditure from corporate funds	Austin, TX 78768
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political Contribution, David Gunn, Justice, 1st Court of Appeals
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/6 Rpt: 11/14	BracewellPAC 00015721
4 Date	5 Payee name
12/18/2024	Joaquin Martinez Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,000.00	7151 Office City Drive
- "	
Expenditure from corporate funds	Houston, TX 77087
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Political Contribution, Joaquin Martinez, Houston City Council
• • • • • • • • • • • • • • • • • • • •	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
·	
Date	Payee name
12/02/2024	Judith Zaffirini Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 627
Evanditure from	
Expenditure from corporate funds	Laredo, TX 78042
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
_/	Candidate/Officeholder/Political Committee
	Political Contribution, Judith Zaffirini, Texas State Senator
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
12/18/2024	Julian Ramirez Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	901 Bagby St., 1st Floor
Ψ1,000.00	301 Bugby St., 13t1 1001
Expenditure from corporate funds	Houston, TX 77002
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Political Contribution, Julian Ramirez, Houston City Council
	Council
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/6 Rpt: 12/14	BracewellPAC 00015721
4 Date	5 Payee name
12/02/2024	Justice Jennifer Caughey Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	3838 Overbrook Lane
Expenditure from corporate funds	Houston, TX 77027
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
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
	Political Contribution, Jennifer Caughey, Justice, 1st
	Court of Appeals
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/02/2024	Katy Boatman for Justice
Amount (\$)	Payee address; City; State; Zip Code
` '	
\$2,500.00	1347 Lamonte Lane
Expenditure from	
corporate funds	Houston, TX 77018
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Political Contribution, Katy Boatman, Justice, 14th
	Court of Appeals
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	-i
Date	Payee name
12/02/2024	Lauren Simmons Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 56386
Expenditure from corporate funds	Houston, TX 77256
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Political Contribution, Lauren Simmons, Texas State
	Representative
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 Comm

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/6 Rpt: 13/14	BracewellPAC 00015721
4 Date	5 Payee name
12/18/2024	Letitia Plummer Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 667204
Expenditure from corporate funds	Houston, TX 77266
8 PURPOSE	· · · · · · · · · · · · · · · · · · ·
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made Ry 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
	Political Contribution, Letitia Plummer, Houston City
	Council
O Compulate ONLY if divert	Condidate/Officeholder name
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/02/2024	Maritza Antu for Judge
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	P.O. Box 6881
Expenditure from corporate funds	Houston, TX 77265
•	
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
	Political Contribution, Maritza Antu, Justice, 14th
	Court of Appeals
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
,	
Date	Payee name
12/18/2024	Sallie Alcorn Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 27510
Expenditure from	Houston, TX 77227
corporate funds	
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
	Council
0 1. 6	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
SAPORAMATO TO BOTTOM O/OI	•

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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

Candidate/Officeholder/F Credit Card Payment		
1 Total pages Schedule	F1: 2 FILER NAME 3 Filer ID (Ethics Commission I	Filers)
Sch: 6/6 Rpt: 14/1		
4 Date	5 Payee name	
12/02/2024	Senator Robert Nichols Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,000	.00 P.O. Box 2347	
Expenditure from corporate funds	Jacksonville, TX 75766	
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.	
	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	`toto
	Political Contribution, Robert Nichols, Texas S Senator	nate
9 Complete ONLY if dire	ect Candidate/Officeholder name Office sought Office held	
expenditure to benefit	C/OH	