FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00067132 18 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Bradley S. NAME Date Received **ELECTRONICALLY FILED** 07/14/2025 NICKNAME LAST **SUFFIX** Brad Hart CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Hunter B NAME NICKNAME LAST **SUFFIX** Hart **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (832) 492-4240 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Day Month Day Year Year **COVERED THROUGH** 01/01/2025 06/30/2025 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE Court Of Appeals, Justice Place 8 District 14 Harris None

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 18

13 C / OH NAME	C / OH NAME Hart, Bradley S. (The Honorable) 14 Filer ID 00067132				
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expend These expenditures may have been made without I officeholders are required to report this informat	it the candidate's or office	eholder's knowledge or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDR	ESS		
16 CONTRIBUTION	1. TOTAL UNITEM	ZED POLITICAL CONTRIBUTIONS(OTHER TH	AN PLEDGES, LOANS,		
TOTALS		ES OF LOANS, OR CONTRIBUTIONS MADE EL	ECTRONICALLY)	\$ 0.00	
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOA	.NS)	\$ 25,267.70	
EXPENDITURE TOTALS	3. TOTAL UNITEM		\$ 0.00		
		\$ 13,083.58			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 33,591.53	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A TING PERIOD	S OF THE LAST DAY	\$ 0.00	
17 AFFIDAVIT		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code	all information required t		
			norable Bradley S. Ha		
		Signature	of Candidate or Officeho	lder	
AFFIX NO	TARY STAMP / SEAL AB	DVE			
		aid	, this the	day	
of	, 20, to co	ertify which, witness my hand and seal of office.			
Signature of office	cer administering oath	Printed name of officer administering oath	Title of office	er administering oath	

SUBTOTALS - JC/OH

FORM JC/OH **COVER SHEET PG 3**

					3 of 18
18 FILEF Hart,		ME Iley S. (The Honorable)	19 Filer ID 00067132	(Eth	ics Commission Filers)
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	Х	\$	24,250.00		
2.	Х	\$	1,017.70		
3.		\$			
4.		\$			
5.	X	\$	10,728.06		
6.		\$			
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	2,355.52
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL	ONS	SCHEDULE A(J)1				
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 1/6 Rpt: 4/18		
2	FILER NAME Hart, Bradle	y S. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067132		
4	Date 03/03/2025	5 Full name of contributor out-of-state PAC (ID#:) Aziz, Muhammad 6 Contributor address; City; State; Zip Code Houston, TX 77002				Amount of Contribution (\$) \$2,000.00		
8	·							
_	Attorney			Attorney				
10		employer/law firm atkins Nichols Agosto Aziz &	Stoaner	11 Law firm of contributor's sp	oous	e (If any)		
12		s a child, law firm of parent(s) (ii						
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)		
	01/02/2025 Baker Botts Amicus Fund					\$5,000.00		
	Contributor's I	Houston, TX 77002		Contributor's Job Title				
Contributor's Principal Occupation Contributor's Job Title								
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)		
	If contributor is	s a child, law firm of parent(s) (i	any)					
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)		
	01/28/2025	Bender, Andrew				\$500.00		
Contributor address; City; State; Zip Code Houston, TX 77056								
	Contributor's F	Principal Occupation		Contributor's Job Title				
	Attorney			Attorney				
		employer/law firm		Law firm of contributor's sp	oous	e (if any)		
	Andrews My							
	If contributor is	s a child, law firm of parent(s) (if	any)					

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.		pages Schedule A(J)1 2/6 Rpt: 5/18	L:
2	FILER NAME Hart, Bradley	y S. (The Honorable)			1	D (Ethics Commissi 7132	on Filers)
4	Date 02/24/2025	5 Full name of contributor Bracewell PAC6 Contributor address; City;					\$2,500.00
		Houston, TX 77002					
8	8 Contributor's Principal Occupation 9 Contributor's Job Title						
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	oouse (if a	ny)	
12	! If contributor is	s a child, law firm of parent(s) (i	f any)				
	Date Full name of contributor out-of-state PAC (ID#:) 01/01/2025 Dick, Eric Contributor address; City; State; Zip Code				Amou 	int of Contribution (\$)	\$500.00
		Houston, TX 77092					
	Contributor's Principal Occupation Contributor's Job Title						
	attorney Contributor's	employer/law firm		attorney Law firm of contributor's sp	acusa (if a	2.4	
	The Dick Lav			Law IIIII of Contributor's Sp	Jouse (II al	iy)	
		s a child, law firm of parent(s) (i	f any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amou	ınt of Contribution (\$)	
	01/08/2025 Dobrowski, Paul Contributor address; City; State; Zip Code Houston, TX 77007						\$250.00
	Contributor's F	Principal Occupation		Contributor's Job Title			
	attorney			attorney			
Contributor's employer/law firm Law firm of contributor's s					oouse (if ar	ny)	
		stafford Pierce, LLP s a child, law firm of parent(s) (i	f any)				

	MONET	ARY POLITICAL		SCHEDULE A(J)1			
	The Instru	ction Guide explains ho	w to complete this f	orm.	1	Total pages Schedule A(J)1: Sch: 3/6 Rpt: 6/18	
2	FILER NAME Hart, Bradley	y S. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00067132	
4	Date 01/23/2025	6 Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$500.00	
		Houston, TX 77010					
8	3 Contributor's Principal Occupation 9 Contributor's Job Title						
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)	
12	2 If contributor is	s a child, law firm of parent(s) (if	any)				
	Date Full name of contributor out-of-state PAC (ID#:) 01/20/2025 Hagans, William Contributor address; City; State; Zip Code					Amount of Contribution (\$) \$250.00	
		Houston, TX 77006					
	Contributor's Principal Occupation Contributor's Job Title						
	attorney			attorney			
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)	
	If contributor is	s a child, law firm of parent(s) (if	any)				
H	Date	Full name of contributor	out-of-state PAC (ID#:_)	Τ	Amount of Contribution (\$)	
	01/28/2025	Hunton Andrews Kurth T	_	······································		\$2,500.00	
	Contributor address; City; State; Zip Code				•		
	O - materille cate of a fi	Houston, TX 77002		Occasionate de Joh Tide			
	Contributor's F	Principal Occupation		Contributor's Job Title			
Contributor's employer/law firm				Law firm of contributor's sp	oous	se (if any)	
	If contributor is	s a child, law firm of parent(s) (if	any)				

	MONET	ARY POLITICAL CONTR	RIBUTIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to comp	plete this form.	1 Total pages Schedule A(J)1: Sch: 4/6 Rpt: 7/18
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Hart, Bradle	y S. (The Honorable)		00067132
4	Date	5 Full name of contributor ut-of-st	tate PAC (ID#:)	7 Amount of Contribution (\$)
	01/28/2025	Jackson Walker LLP PAC	\$2,500.00	
		6 Contributor address; City; State; Zip Cod	de	
		Dallas, TX 75201		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
10) Contributor's	employer/law firm	11 Law firm of contributor's	spouse (if any)
12	If contributor	s a child, law firm of parent(s) (if any)		
H	Date	Full name of contributor out-of-st	tate PAC (ID#:)	Amount of Contribution (\$)
	01/28/2025	Mithoff, Richard	aut i Ac (ibr)	\$1,500.00
		Contributor address; City; State; Zip Cod	de	·····
		Houston, TX 77002		
-	Contributor's	I Principal Occupation	Contributor's Job Title	_ I
	attorney		attorney	
	Contributor's	employer/law firm	Law firm of contributor's	spouse (if any)
	Mithoff Law			
	If contributor	s a child, law firm of parent(s) (if any)	·	
	Date	Full name of contributor out-of-st	tate PAC (ID#:)	Amount of Contribution (\$)
	01/08/2025	Nichols, Taylor		\$250.00
		Contributor address; City; State; Zip Cod	de	
		Houston, TX 77002		
	Contributor's	Principal Occupation	Contributor's Job Title	
	attorney		attorney	
		employer/law firm	Law firm of contributor's	spouse (if any)
	-	epo, Harvin & Robbins, LLP		
	If contributor i	s a child, law firm of parent(s) (if any)		
H				

MC	NET	ARY POLITICAL (ONS	5	SCHEDULE A	A(J)1	
The	Instruc	ction Guide explains how	w to complete this f	form.	1 Total page: Sch: 5/6 F	s Schedule A(J)1 Rpt: 8/18	:
2 FILEF		S. (The Honorable)			3 Filer ID (I	Ethics Commission	on Filers)
4 Date		5 Full name of contributor Reed Smith LLP 6 Contributor address; City; S	out-of-state PAC (ID#:_			Contribution (\$)	\$500.00
		Pittsburg, PA 15222					
8 Contr	Contributor's Principal Occupation 9 Contributor's Job Title						
10 Contr	10 Contributor's employer/law firm 11 Law firm of contributor's s				oouse (if any)		
12 If con	ntributor is	s a child, law firm of parent(s) (if	any)				
Date		Full name of contributor	out-of-state PAC (ID#:)	Amount of	Contribution (\$)	
02/2	02/25/2025 Reynolds Frizzell LLP Contributor address; City; State; Zip Code					(,	\$1,000.00
		Houston, TX 77002					
Contr	Contributor's Principal Occupation Contributor's Job Title				•		
Contr	ributor's e	employer/law firm		Law firm of contributor's sp	oouse (if any)		
If con	ntributor is	s a child, law firm of parent(s) (if	any)				
Date		Full name of contributor	out-of-state PAC (ID#:)	Amount of	Contribution (\$)	
02/12	2/2025	The Lanier Law Firm, P.0	c				\$1,000.00
		Contributor address; City; S Houston, TX 77064	State; Zip Code				
Contr	ributor's F	Principal Occupation		Contributor's Job Title	1		
Contr	ributor's e	employer/law firm		Law firm of contributor's sp	oouse (if any)		
If con	ntributor is	s a child, law firm of parent(s) (if	any)				

	MONET	ARY POLITICAL CONT	FRIBUTIC	DNS			SCHEDULE	A(J)1
	The Instru	ction Guide explains how to co	mplete this f	orm.	1		ages Schedule A(J /6 Rpt: 9/18)1:
2	FILER NAME Hart, Bradle	y S. (The Honorable)			3		(Ethics Commis	sion Filers)
4	Date 03/05/2025	Wright Close & Barger LLP 6 Contributor address; City; State; Zip Code				Amoun	t of Contribution (\$	\$1,500.00
		Houston, TX 77056						
8	8 Contributor's Principal Occupation 9 Contributor's Job Title							
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any	')	
12	If contributor is	s a child, law firm of parent(s) (if any)						
	Date Full name of contributor out-of-state PAC (ID#:					Amoun	t of Contribution (\$	\$2,000.00
		Houston, TX 77002						
	Contributor's F	Principal Occupation		Contributor's Job Title				
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any	')	
	If contributor is	s a child, law firm of parent(s) (if any)						

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 10/18 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Hart, Bradley S. (The Honorable) 00067132 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 01/28/2025 Haynes and Boone Political Action Committee \$1,017.70 Judicial reception and 7 Contributor address; City; State; Zip Code fundraiser. Houston, TX 77002 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Operations Made By Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services The Instruction G			ages	/Contract Labor		OTHER (enter a	a category not listed above)	
Ļ		-			ulue explains no	W to con	пріс	te tilis loilli.	_		/= a =:	
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission Fil	ers)
	Sch: 1/5 Rpt: 11/18		Hart, Bradle	y S. (The Hono	rable)					00067132		
4	Date	5	Payee name									
	01/04/2025		Colon & Cor	mpany								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Cod	de					
	\$1,200.00		7941 Katy F	reeway								
			Suite 108									
			Houston, TX	77024								
8	PURPOSE	(a)					(h)	Description				
ľ	OF	اس	Consulting E	e Categories listed at t	the top of this schedu	ule)	(2)	:	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		Consuming L	-xpcrisc		1		=		officeholder living		
						1		post election	cor	nsulting/fund	draising manageme	nt.
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	ceholder name	Off	fice soug	ght			Office h	eld	
	experioritire to benefit C/O											
	Date		Payee name									
	02/27/2025		Colon & Cor	mpany								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Cod	de					
	\$950.00		7941 Katy F	reeway								
			Suite 108									
			Houston, TX	77024								
	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this schedu	ule)	(b)	Description				
	OF EXPENDITURE		Consulting E					=			plete Schedule T.	
								_		officeholder livin		
								Consulting ar	10 F	-unaraising	management.	
	0 1: 0 1: 0	Ļ	- " ' ' '		0.00					O.K. 1		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offic	cenolder name	Оп	fice soug	gnt			Office h	ela	
		_										
	Date		Payee name									
	03/20/2025		Colon & Cor	mpany ————————————————————————————————————								
	Amount (\$)		Payee addres	•	State;	Zip Coo	de					
	\$300.00		7941 Katy F	reeway								
			Suite 108									
			Houston, TX	77024								
	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this schedu	ule)	(b)	Description				
	OF		Fundraising			,			outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE		Ū					_		officeholder living		
								Fundraising C deadline	Con	sulting & M	anagement before	
								GOGGIIIIO				
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Office	ceholder name	Offi	fice soug	ght			Office h	eld	
	Superiord to belieff 6/01	•										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/5 Rpt: 12/18	Hart, Bradley S. (The Honorable) 00067132
4	Date	5 Payee name
	06/16/2025	Galveston County Republican Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$125.00	P.O. Box 1423
		League City, TX 77574
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense 2025 Lincoln Reagan Dinner ticket
		2023 Ellicolli Neagari Billilei ticket
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	Davida marra
	06/15/2025	Payee name Galveston County Republican Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.00	P.O. Box 1423
		League City, TX 77574
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense ticket to Lincoln Reagan Dinner
		ticket to Lincoln Reagan Diffile
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Davida marra
	02/05/2025	Payee name Grimes County Republican Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	9779 Mountbatten Trail
		Iola, TX 77861
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense table at annual dinner event
		table at allitual ullifier event
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		
1		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services The Instruction Guide exp		Vages	/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAM	 E				3	Filer ID	(Ethics Commission Filers)
	Sch: 3/5 Rpt: 13/18		ey S. (The Honorable)					00067132	
4	Date	5 Payee name	;						
	01/04/2025	Hart, Brad	(The Honorable)						
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode				
	\$2,404.75	12645 Mer	norial Dr.						
		Ste. F1 #72	24						
		Houston, T	X 77024						
8	PURPOSE	(a) Category (s	See Categories listed at the top of t	this schedule)	(b)	Description			
	OF EXPENDITURE	Loan Repa	yment/Reimbursement	t		=		de of Texas. Com	
						_		officeholder living	expenses made from
									/24 through 12/31/24
9	Complete ONLY if direct expenditure to benefit C/OH		ficeholder name	Office sou	ıght			Office he	eld
_	Date	Payee name							
	01/06/2025	1 1	(The Honorable)						
	Amount (\$)	Payee addre	,	State; Zip Co	nde				
	\$844.45	12645 Mer	•	O.a.o,p o.	545				
	4011110	Ste. F1 #72							
		Houston, T							
	PURPOSE OF		See Categories listed at the top of t		(b)	Description		d4.T O	oleke Coberdule T
	EXPENDITURE	Loan Repa 	yment/Reimbursement	İ		=		de of Texas. Comp officeholder living	
						—			sed on campaign as
						reflected in 1/			
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	ight			Office he	eld
	Date	Payee name)						
	01/07/2025	Hart, Brad	(The Honorable)						
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode				
	\$1,120.32	12645 Mer	norial Dr.						
		Ste. F1 #72	24						
		Houston, T	X 77024						
	PURPOSE	(a) Category (s	See Categories listed at the top of t	this schedule)	(b)	Description			
	OF EXPENDITURE	Loan Repa	yment/Reimbursement	t				de of Texas. Com	
						_		officeholder living	expense sed for campaign as
						reflected in 1/			
	Complete ONLY if direct	Candidate/Off	ficeholder name	Office sou	ught			Office he	eld
	expenditure to benefit C/O	Н			-				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to con	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 4/5 Rpt: 14/18	Hart, Bradley S. (The Honorable)		00067132
4	Date	5 Payee name		
	01/08/2025	Hart, Brad (The Honorable)		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$1,000.00	12645 Memorial Dr.		
		Ste. F1 #724		
		Houston, TX 77024		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Loan Repayment/Reimbursement		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				repayment of loan
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office soug H	ght	Office held
_	Dete			
	Date	Payee name		
	03/08/2025	Hart, Brad (The Honorable)		
	Amount (\$)	Payee address; City; State; Zip Coc	de	
	\$888.54	12645 Memorial Dr.		
	!	Ste. F1 #724		
	!	Houston, TX 77024		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Loan Repayment/Reimbursement		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Reimburse personal funds spent on political/lone star
	!			awards specifically
_	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/O			
	Date	Payee name		
	04/05/2025	Hart, Brad (The Honorable)		
	Amount (\$)	Payee address; City; State; Zip Coc	de	
	\$1,250.00	12645 Memorial Dr.		
	Ţ-,	Ste. F1 #724		
		Houston, TX 77024		
		1		
	PURPOSE OF	, (************************************	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Loan Repayment/Reimbursement		Check if Austin, TX, officeholder living expense
				Reimbursement to FBC LRD table portion
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/OF			

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 (orbits a extension not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expense Printin Legal Services Salari The Instruction Guide explains how to		es/Contract Labor	Travel Out of Dist OTHER (enter a d	rict category not listed above)	
	Total pages Schedule F1: Sch: 5/5 Rpt: 15/18		Hart, Bradley S. (The Honorable)		l	Filer ID 00067132	(Ethics Commission Filers)	
4	Date 03/08/2025	5 Payee name Texas Center for the Judiciary						
6	Amount (\$) \$120.00		Payee address; City; State; Zip 1210 San Antonio St Ste 800 Austin, TX 78701	Code				
8	PURPOSE OF EXPENDITURE		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 Donation for training judiciary.				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name Office s	ough	t	Office he	ld	
	Date 01/29/2025		Payee name Young, Deborah					
	Amount (\$) \$100.00		Payee address; City; State; Zip 301 Fannin Houston, TX 77042	Code				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Fund	(b	Description Check if travel outside Check if Austin, TX, o Contribution to the "Cheer Fund" for	officeholder living e 14th COA	expense \ Office	
	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeholder name Office s	ough	t	Office he	ld	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor			Travel in District Travel Out of District OTHER (enter a category not listed above)			
	Credit Card Payment The Instruction Guide explains how to complete this form.								
1	Total pages Schedule G:	2 FILER NAMI	Ē			3	Filer ID	(Ethics Commission Filers)	
	Sch: 1/3 Rpt: 16/18	Hart, Bradle	ey S. (The Honorable)				000671	.32	
4	Date	5 Payee name							
	02/27/2025	Cypress Republicans							
6	Amount (\$)	7 Payee addre	ess; City; State;	Zip Co	ode				
	\$7.00	9111 Belto	n Bend Ct						
	Reimbursement from								
	X political contributions intended	Cypress, TX 77433							
8	PURPOSE	(a) Category (S	ee Categories listed at the top of this sch	edule)	(b) Description	Ch	eck if travel	l outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Food/Beve	rage Expense			Ch	eck if Austi	n, TX, officeholder living expense	
	LAFEINDITORE				beverage ticket to	o m	onthly n	neeting	
9	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought			Office held	
	C/OH								
	Date	Payee name							
	03/04/2025	Fort Bend (County						
	Amount (\$)	(\$) Payee address; City; State; Zip Code							
	\$25.00								
	Reimbursement from								
X political contributions									
	PURPOSE OF	1	see Categories listed at the top of this scho	edule)	Description			I outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
	EXPENDITURE	Fee for Bad	age Entry		Ego for socurity h	_		ntry into Fort Bend County	
					Courthouse.	υαυί	je ioi ei	nity into Port Bend County	
_	Complete ONLY if disent		halder name		Office country			Office held	
	Complete ONLY if direct expenditure to benefit	Candidate/Office	noider name		Office sought			Office held	
	C/OH								
	Date	Payee name							
	04/05/2025	1 -	County Republican Party						
					- d-				
	Amount (\$)	Payee address; City; State; Zip Code PO Box 461							
	\$1,250.00	PO BOX 46	T						
Reimbursement from political contributions intended Sugar Land, TX 77487									
\vdash	PURPOSE	_	see Categories listed at the top of this sch	edule)	Description	Ch	eck if travel	I outside of Texas. Complete Schedule T.	
	OF	Event Expe		,		_		n, TX, officeholder living expense	
I EXPENDITURE I					– ole a	e at Lincoln Reagan Dinner			
								-	
	Complete ONLY if direct	L Candidate/Office	holder name		Office sought			Office held	
	expenditure to benefit	_ a.			Coc cougnit			5555iu	
L	C/OH								

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor			Travel in District Travel Out of District OTHER (enter a category not listed above)			
	Credit Card Payment		The Instruction Guide explains	how to co	omplete this form.				
1	Total pages Schedule G:	2 FILER NAMI	Ξ			3	Filer ID	(Ethics Commission Filers)	
	Sch: 2/3 Rpt: 17/18	Hart, Bradle	ey S. (The Honorable)				000671	.32	
4	Date	5 Payee name							
	03/07/2025	Lone Star CC, LLC							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$888.52	1213 Cany	on Curve						
	Reimbursement from								
	political contributions intended	Spring Branch, TX 78070							
8	PURPOSE	(a) Category (s	ee Categories listed at the top of this sch	edule)	(b) Description	=		I outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Awards			l L	Ch	eck if Austi	n, TX, officeholder living expense	
					coin awards for c	cons	tituents	/voters reflecting office.	
9	Complete ONLY if direct	Candidate/Office	holder name		Office sought			Office held	
	expenditure to benefit C/OH								
	Date	Payee name							
	03/15/2025	Texas Cen	ter for the Judiciary						
	Amount (\$)	Payee address; City; State; Zip Code							
	\$75.00	1210 San <i>A</i>	Antonio St						
	Reimbursement from	Ste 800							
	x political contributions intended	Austin, TX	78701						
	PURPOSE	Category (s	ee Categories listed at the top of this sch	edule)	Description	Ch	eck if trave	I outside of Texas. Complete Schedule T.	
	OF	Conference	-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		=		n, TX, officeholder living expense	
	EXPENDITURE				Fee for attendand	– ce a	ıt Regio	nal Judicial Conference	
	Complete ONLY if direct	L Candidate/Office	holder name		Office sought			Office held	
	expenditure to benefit				· ·				
	C/OH								
	Date	Payee name							
	03/21/2025	Three Brotl	ners Bakery						
	Amount (\$)	Payee addre	ess; City; State	; Zip Co	ode				
	\$65.00	12393 King	sride Lane						
	Reimbursement from								
	X political contributions intended	Houston, TX 77024							
	PURPOSE	Category (S	ee Categories listed at the top of this sch	edule)	Description	Ch	eck if trave	l outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Monthly Co	ourt Event			Ch	eck if Austi	n, TX, officeholder living expense	
	EXPENDITORE				Chambers contril	butio	on to m	onthly court event.	
		Candidate/Office	holder name		Office sought			Office held	
	expenditure to benefit C/OH								
L	5,011								

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 3/3 Rpt: 18/18 Hart, Bradley S. (The Honorable) 00067132 Date Payee name 03/26/2025 Village Republican Women 6 Amount (\$) Payee address; City; State; Zip Code \$45.00 P.O. Box 79924 Reimbursement from political contributions intended Х Houston, TX 77024 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** expense for meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH