

COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT

FORM CEC
COVER SHEET PG 1

The CEC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00017074	2 Total pages filed: 22
3 COMMITTEE NAME Brazoria County Democratic Party (CEC)		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 01/11/2025	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3215 Amerson Dr. Pearland, TX 77584		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Mr. Jose R.	MI	
	NICKNAME LAST SUFFIX Joe Parra		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3215 Amerson Dr. Pearland, TX 77584		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3215 Amerson Dr. Pearland, TX 77584		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (281) 451-9484		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Final Report <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year Month Day Year 10/27/2024 THROUGH 12/31/2024		
11 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC
COVER SHEET PG 2

12 COMMITTEE NAME Brazoria County Democratic Party (CEC)	13 Filer ID (Ethics Commission Filers) 00017074
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,987.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,826.83
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5,496.54
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Jose R. Parra

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - CEC**FORM CEC**
COVER SHEET PG 3
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17 COMMITTEE NAME Brazoria County Democratic Party (CEC)		18 Filer ID 00017074	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	4,987.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	5,826.83
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
10.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/10 Rpt: 4/22
2 FILER NAME Brazoria County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00017074
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, UBAH	7 Amount of Contribution (\$) \$41.00
	6 Contributor address; City; State; Zip Code MANVEL, TX 77578	
8 Principal occupation / Job title (See Instructions) EDUCATOR		9 Employer (See Instructions) HISD
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAREY-BAY, ERMA	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code MANVEL, TX 77578	
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, JUANITA	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code PEARLAND, TX 77584	
Principal occupation / Job title (See Instructions) OFFICER		Employer (See Instructions) GOVERNMENT
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANGE, AVOLENE C.	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code ALVIN, TX 77511	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COSKREY, VALERIE	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code SWEENEY, TX 77480	
Principal occupation / Job title (See Instructions) UNEMPLOYED		Employer (See Instructions) UNEMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/10 Rpt: 5/22
2 FILER NAME Brazoria County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00017074
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD , LEWIS <hr/> 6 Contributor address; City; State; Zip Code ANGLETON, TX 77515	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) OFFICE MANAGER		9 Employer (See Instructions) IUOE LOCAL 564
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIS, CAROLINE <hr/> Contributor address; City; State; Zip Code DESOTO, TX 75115	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) SELF-EMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEULESS, SCOTT <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) AUTHOR/CONSULTANT		Employer (See Instructions) SELF EMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FILLMAN, VANESSA <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77581	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) UNEMPLOYED		Employer (See Instructions) UNEMPLOYED
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOWLER, THOMAS <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) UNEMPLOYED		Employer (See Instructions) UNEMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/10 Rpt: 6/22
2 FILER NAME Brazoria County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00017074
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRANCIS, JENNIFER <hr/> 6 Contributor address; City; State; Zip Code PEARLAND, TX 77581	7 Amount of Contribution (\$) \$51.00
8 Principal occupation / Job title (See Instructions) UNEMPLOYED		9 Employer (See Instructions) UNEMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAUTNEY, SUZANNE <hr/> Contributor address; City; State; Zip Code ANGLETON, TX 77515	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) NONE
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARRISON, IVORY <hr/> Contributor address; City; State; Zip Code MISSOURI CITY, TX 77489	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) UNEMPLOYED		Employer (See Instructions) UNEMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, DELORES <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) UNEMPLOYED		Employer (See Instructions) UNEMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, GARY <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/10 Rpt: 7/22
2 FILER NAME Brazoria County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00017074
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, MARGARET <hr/> 6 Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) UNEMPLOYED		9 Employer (See Instructions) UNEMPLOYED
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEEP AL GREEN IN CONGRESS <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77054	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACASKIE, ROSEMARY W. <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Machining Specialists Inc
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACGREGOR, DONALD <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) TEACHER		Employer (See Instructions) RETIRED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, ZACHERY <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) CONSTRUCTION MANAGER		Employer (See Instructions) DESIGNS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/10 Rpt: 8/22
2 FILER NAME Brazoria County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00017074
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHIS, CAROLYN	7 Amount of Contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code PEARLAND, TX 77584	
8 Principal occupation / Job title (See Instructions) UNEMPLOYED		9 Employer (See Instructions) UMEMPLOYED
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHIS, S W	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code ROSHARON, TX 77583	
Principal occupation / Job title (See Instructions) CAREGIVER		Employer (See Instructions) SELF EMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYER, KAREN	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	
Principal occupation / Job title (See Instructions) UNEMPLOYED		Employer (See Instructions) UNEMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNRO, ROBERT	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code ANGELTON, TX 77515	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, LAURA G	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code ALVIN, TX 77511	
Principal occupation / Job title (See Instructions) RENTAL PROPERTY MANAGER		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/10 Rpt: 9/22
2 FILER NAME Brazoria County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00017074
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGARVEY, KRISTEN <hr/> 6 Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) DOW Chemical
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OVERTON, TIM <hr/> Contributor address; City; State; Zip Code SUGARLAND, TX 77496	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) UNEMPLOYED		Employer (See Instructions) UNEMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARRA, JOSE <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) RETIRED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEGODA, DENISE <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POLK, AMANDA <hr/> Contributor address; City; State; Zip Code MANVEL, TX 77578	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NURSE		Employer (See Instructions) MD ANDERSON CANCER CENTER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/10 Rpt: 10/22
2 FILER NAME Brazoria County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00017074
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRICE, DARLA <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77047	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) UNEMPLOYED		9 Employer (See Instructions) UNEMPLOYED
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RENTERS WAREHOUSE HOUSTON <hr/> Contributor address; City; State; Zip Code MANVEL, TX 77578	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions) UNEMPLOYED		Employer (See Instructions) UNEMPLOYED
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNAPP, COOPER <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77581	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) NASA
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNAPP, LEILANI <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77581	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) SPIRIT HALLOWEEN
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPAIN, CHARLES <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/10 Rpt: 11/22
2 FILER NAME Brazoria County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00017074
4 Date 12/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, TARAH <hr/> 6 Contributor address; City; State; Zip Code PEARLAND, TX 77584	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) INSTRUCTIONAL DESIGNER		9 Employer (See Instructions) SOUTHWEST AIRLINES
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEPPER, SHEILA <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SUB TEACHER		Employer (See Instructions) BRAZORIA IND SCHOOL DISTRICT
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THIEDE, CHRIS <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CHEMICAL ENGINEER		Employer (See Instructions) DOW
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, ZARIA <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) UNEMPLOYED		Employer (See Instructions) UNEMPLOYED
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN CLEVE, JUDY <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) PR CONSULTANT		Employer (See Instructions) VAN CLEVE-HOUSTON PR

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/10 Rpt: 12/22
2 FILER NAME Brazoria County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00017074
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHN, DEBBIE <hr/> 6 Contributor address; City; State; Zip Code PEARLAND, TX 77584	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) UNEMPLOYED		9 Employer (See Instructions) UNEMPLOYED
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOSS, JOHNNY <hr/> Contributor address; City; State; Zip Code ANGLETON, TX 77515	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) UNEMPLOYED		Employer (See Instructions) UNEMPLOYED
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALTOS, AMANDA <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) MODERNA
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITFIELD, DEBORAH <hr/> Contributor address; City; State; Zip Code PEARLAND , TX 77584	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) UNEMPLOYED		Employer (See Instructions) UNEMPLOYED
Date 12/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WORD, BONNIE <hr/> Contributor address; City; State; Zip Code PEARLAND, TX 77584	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PHYSICIAN		Employer (See Instructions) SELF EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/10 Rpt: 13/22
2 FILER NAME Brazoria County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00017074
4 Date 12/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZAMORA, STEPHANIE <hr/> 6 Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) NURSE PRACTITIONER		9 Employer (See Instructions) THEORY HEALTH MEDICAL CLINIC

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 1/9 Rpt: 14/22	2	FILER NAME Brazoria County Democratic Party (CEC)	3	Filer ID (Ethics Commission Filers) 00017074
4	Date 12/26/2024	5	Payee name ACTBLUE		
6	Amount (\$) \$51.07	7	Payee address; City; State; Zip Code P O BOX 441146 SOMMERVILLE, ME 02144		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FEES		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/07/2024		Payee name COASTAL PLAINS LANDFILL		
	Amount (\$) \$70.00		Payee address; City; State; Zip Code P. O. BOX 184 FRIENDSWOOD, TX 77549		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OFFICE CLEANUP		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/27/2024		Payee name EXTRA SPACE STORAGE		
	Amount (\$) \$165.64		Payee address; City; State; Zip Code 1400 S. DURANT ALVIN, TX 77511		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STORAGE		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/9 Rpt: 15/22	2 FILER NAME Brazoria County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00017074
4 Date 12/23/2024	5 Payee name EXTRA SPACE STORAGE	
6 Amount (\$) \$115.00	7 Payee address; City; State; Zip Code 1400 S. DURANT ALVIN, TX 77511	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STORAGE
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2024	Payee name HATTON, LARITA LASHEA	
Amount (\$) \$75.00	Payee address; City; State; Zip Code 823 NORFOLK DRIVE PEARLAND, TX 77584	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLL GREETER
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2024	Payee name HILL, DYLAN	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 2822 RUSSETT PLACE PEARLAND, TX 77584	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SIGN INSTALLATION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/9 Rpt: 16/22	2 FILER NAME Brazoria County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00017074
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4 Date 11/04/2024	5 Payee name HOWARD, MELISSA TAYLOR
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6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 502 CHAMPLAIN WAY IOWA COLONY, TX 77583
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLL GREETER
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/07/2024	Payee name HOWARD, MELISSA TAYLOR
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Amount (\$) \$150.00	Payee address; City; State; Zip Code 502 CHAMPLAIN WAY IOWA COLONY, TX 77583
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CANVASSER
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/18/2024	Payee name JONES, BYRON
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Amount (\$) \$150.00	Payee address; City; State; Zip Code 7505 MISTY LAKE LANE PEARLAND, TX 77581
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLL GREETER
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 4/9 Rpt: 17/22	2	FILER NAME Brazoria County Democratic Party (CEC)	3	Filer ID (Ethics Commission Filers) 00017074
4	Date 11/18/2024	5	Payee name JONES, BYRON		
6	Amount (\$) \$150.00	7	Payee address; City; State; Zip Code 7505 MISTY LAKE LANE PEARLAND, TX 77581		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLL GREETER		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/04/2024		Payee name JONES, HUBERT		
	Amount (\$) \$100.00		Payee address; City; State; Zip Code 7505 MISTY LAKE LANE PEARLAND, TX 77581		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CANVASSER		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/04/2024		Payee name JONES, HUBERT		
	Amount (\$) \$150.00		Payee address; City; State; Zip Code 7505 MISTY LAKE LANE PEARLAND, TX 77581		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SIGN INSTALLATION		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/9 Rpt: 18/22	2 FILER NAME Brazoria County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00017074
4 Date 10/31/2024	5 Payee name JONES, HUBERT	
6 Amount (\$) \$75.00	7 Payee address; City; State; Zip Code 7505 MISTY LAKE LANE PEARLAND, TX 77581	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLL GREETER
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2024	Payee name JONES, HUBERT	
Amount (\$) \$180.00	Payee address; City; State; Zip Code 7505 MISTY LAKE LANE PEARLAND, TX 77581	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLL GREETER
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2024	Payee name JONES, PATRICIA	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 7505 MISTY LAKE LANE PEARLAND, TX 77581	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CANVASSER
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 6/9 Rpt: 19/22	2	FILER NAME Brazoria County Democratic Party (CEC)	3	Filer ID (Ethics Commission Filers) 00017074
4	Date 11/04/2024	5	Payee name JONES, PATRICIA		
6	Amount (\$) \$150.00	7	Payee address; City; State; Zip Code 7505 MISTY LAKE LANE PEARLAND, TX 77581		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SIGN INSTALLATION		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/05/2024		Payee name JONES, PATRICIA		
	Amount (\$) \$150.00		Payee address; City; State; Zip Code 7505 MISTY LAKE LANE PEARLAND, TX 77581		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLL GREETER		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/31/2024		Payee name JONES, PATRICIA		
	Amount (\$) \$75.00		Payee address; City; State; Zip Code 7505 MISTY LAKE LANE PEARLAND, TX 77581		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLL GREETER		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/9 Rpt: 20/22	2 FILER NAME Brazoria County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00017074
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4 Date 12/19/2024	5 Payee name MAILCHIP.COM
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6 Amount (\$) \$115.12	7 Payee address; City; State; Zip Code 675 PONCE DE LEON AVE NE SUITE 5000 ATLANTA, GA 30308
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense WEBSITE
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/07/2024	Payee name RENTERS WAREHOUSE HOUSTON
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Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 11800 MAGNOLIA PARKWAY MANVEL, TX 77578
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OFFICE RENT
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/31/2024	Payee name ROBEY, CARYN
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Amount (\$) \$75.00	Payee address; City; State; Zip Code 7107 WATER GLEN LANE MANVEL, TX 77578
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CANVASSER
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/9 Rpt: 21/22	2 FILER NAME Brazoria County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00017074
4 Date 10/31/2024	5 Payee name ROBEY, LOUIS	
6 Amount (\$) \$30.00	7 Payee address; City; State; Zip Code 7107 WATER GLEN LANE MANVEL, TX 77578	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CANVASSER
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2024	Payee name ROBEY, MARC	
Amount (\$) \$45.00	Payee address; City; State; Zip Code 7107 WATER GLEN LANE MANVEL, TX 77578	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CANVASSER
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2024	Payee name SCOTT, MALCOLM	
Amount (\$) \$75.00	Payee address; City; State; Zip Code 823 NORFORK DRIVE PEARLAND, TX 77584	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLL GREETER
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 9/9 Rpt: 22/22	2	FILER NAME Brazoria County Democratic Party (CEC)	3	Filer ID (Ethics Commission Filers) 00017074
4	Date 11/04/2024	5	Payee name WOOSLEY, MARILYN		
6	Amount (\$) \$100.00	7	Payee address; City; State; Zip Code 3905 CEDARWOOD DRIVE PEARLAND, TX 77584		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SIGN INSTALLATION		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/07/2024		Payee name YOUNG, KAITLYN		
	Amount (\$) \$180.00		Payee address; City; State; Zip Code 1231 DIAMOND DRAPE DRIVE PEARLAND, TX 77581		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CANVASSER		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/04/2024		Payee name YOUNG, KAITLYN		
	Amount (\$) \$100.00		Payee address; City; State; Zip Code 1231 DIAMOND DRAPE DRIVE PEARLAND, TX 77581		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLL GREETER		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held