

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM **JC/OH**  
COVER SHEET PG 1

<b>The JC/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00084216	<b>2</b> Total pages filed:  38
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Natalia M.	MI
	NICKNAME	LAST Cornelio	SUFFIX
<b>OFFICE USE ONLY</b>			
			Date Received <b>ELECTRONICALLY FILED</b> 01/15/2025
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 2314 Tannehill Dr  Houston, TX 77008		ZIP CODE
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
			Date Imaged
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Lenora	MI
	NICKNAME	LAST Sorola-Pohlman	SUFFIX
<b>6</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2314 Tannehill Dr.  Houston, TX 77008		
<b>7</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
(713) 628-7500			
<b>8</b> REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
<b>9</b> PERIOD COVERED	Month    Day    Year 07/01/2024	THROUGH	Month    Day    Year 12/31/2024
<b>10</b> ELECTION	ELECTION DATE Month    Day    Year 11/05/2024		ELECTION TYPE
			<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
<b>11</b> OFFICE	OFFICE HELD (if any) District Judge District 351 Harris	<b>12</b> OFFICE SOUGHT (if known) Criminal District Court Judge District 351	

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# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

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<b>13 C / OH NAME</b> Cornelio, Natalia M. (The Honorable)	<b>14 Filer ID</b> (Ethics Commission Filers) 00084216
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.										
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;"><b>COMMITTEE TYPE</b></td> <td><b>COMMITTEE NAME</b></td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td rowspan="2"><b>COMMITTEE ADDRESS</b></td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> </tr> <tr> <td colspan="2"><b>COMMITTEE CAMPAIGN TREASURER NAME</b></td> </tr> <tr> <td colspan="2"><b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b></td> </tr> </table>	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>	<input type="checkbox"/> GENERAL	<b>COMMITTEE ADDRESS</b>	<input type="checkbox"/> SPECIFIC	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>		<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>			
	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>									
	<input type="checkbox"/> GENERAL	<b>COMMITTEE ADDRESS</b>									
	<input type="checkbox"/> SPECIFIC										
<b>COMMITTEE CAMPAIGN TREASURER NAME</b>											
<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>											

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	34,755.50
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$	15,854.78
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	80,097.02
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

**17 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.

\_\_\_\_\_  
The Honorable Natalia M. Cornelio  
Signature of Candidate or Officeholder

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

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<b>18 FILER NAME</b> Cornelio, Natalia M. (The Honorable)		<b>19 Filer ID</b> 00084216	(Ethics Commission Filers)
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	34,755.50
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	15,854.78
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 G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 1/22 Rpt: 4/38
<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 10/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adamo, Sam <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77006	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Adamo & Adamo		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguayo, Carlos <hr/> Contributor address; City; State; Zip Code  Humble, TX 77396	Amount of Contribution (\$)  \$150.00
Contributor's Principal Occupation Attorney		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akins Pastorini, Winifred <hr/> Contributor address; City; State; Zip Code  Houston, TX 77098	Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 2/22 Rpt: 5/38
<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 07/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarez, Alva <hr/> <b>6</b> Contributor address; City; State; Zip Code  Pecos, TX 79772	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarez, Alva <hr/> Contributor address; City; State; Zip Code  Pecos, TX 79772	Amount of Contribution (\$)  \$10.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarez, Alva <hr/> Contributor address; City; State; Zip Code  Pecos, TX 79772	Amount of Contribution (\$)  \$10.00
Contributor's Principal Occupation Attorney		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 3/22 Rpt: 6/38
2 FILER NAME Cornelio, Natalia M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084216
4 Date 10/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarez, Alva	7 Amount of Contribution (\$)  \$10.00
	6 Contributor address; City; State; Zip Code  Pecos, TX 79772	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarez, Alva	Amount of Contribution (\$)  \$10.00
	Contributor address; City; State; Zip Code  Pecos, TX 79772	
Contributor's Principal Occupation Attorney		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarez, Alva	Amount of Contribution (\$)  \$10.00
	Contributor address; City; State; Zip Code  Pecos, TX 79772	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Reeves County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 4/22 Rpt: 7/38
<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 10/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anastasio, Abigail <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77019	<b>7</b> Amount of Contribution (\$)  \$1,035.25
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Self Employed/Ceja Law Firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Marisa <hr/> Contributor address; City; State; Zip Code  Houston, TX 77087	Amount of Contribution (\$)  \$259.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Gonzalez Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bacy, Akilah <hr/> Contributor address; City; State; Zip Code  Houston, TX 77243	Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 5/22 Rpt: 8/38
2 FILER NAME Cornelio, Natalia M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084216
4 Date 10/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Noel	7 Amount of Contribution (\$)  \$250.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77014	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cedillo, John Paul	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Rosenberg, TX 77471	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Cedillo Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cleggett, Dejean	Amount of Contribution (\$)  \$103.75
	Contributor address; City; State; Zip Code  Missouri City, TX 77459	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Cleggett Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 6/22 Rpt: 9/38
<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 10/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corral, Adam	<b>7</b> Amount of Contribution (\$) \$2,000.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77210	
<b>8</b> Contributor's Principal Occupation Lawyer		<b>9</b> Contributor's Job Title attorney
<b>10</b> Contributor's employer/law firm self		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cors, Nathan	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Kingwood, TX 77339	
Contributor's Principal Occupation Patent Examiner		Contributor's Job Title Patent Examiner
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Neal	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Houston, TX	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 7/22 Rpt: 10/38
2 FILER NAME Cornelio, Natalia M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084216
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deal, Aditi	7 Amount of Contribution (\$)  \$103.75
	6 Contributor address; City; State; Zip Code  Houston, TX 77018	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Durham Pittard and Spalding		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, George	Amount of Contribution (\$)  \$250.00
	Contributor address; City; State; Zip Code  houston, TX 77007	
Contributor's Principal Occupation attorney		Contributor's Job Title partner
Contributor's employer/law firm Edwards Sutarwalla Sumani		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fazel, Ali	Amount of Contribution (\$)  \$3,000.00
	Contributor address; City; State; Zip Code  TX, TX 77008	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 8/22 Rpt: 11/38
2 FILER NAME Cornelio, Natalia M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084216
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fazel, Ali	7 Amount of Contribution (\$)  \$2,000.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77058	
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feldman, Cris	Amount of Contribution (\$)  \$500.00
	Contributor address; City; State; Zip Code  Houston, TX 77098	
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm Feldman and Feldman		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fiedler, Maria	Amount of Contribution (\$)  \$259.00
	Contributor address; City; State; Zip Code  Houston, TX 77087	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Gonzalez Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 9/22 Rpt: 12/38
<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 10/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Floyd, John	<b>7</b> Amount of Contribution (\$)  \$750.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77098-5210	
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Self		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Domingo	Amount of Contribution (\$)  \$1,000.00
	Contributor address; City; State; Zip Code  Dallas, TX 75208	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Casey	Amount of Contribution (\$)  \$259.00
	Contributor address; City; State; Zip Code  Pearland, TX 77584	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 10/22 Rpt: 13/38
<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 10/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Ericon Lee <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77087	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Garza and Associates		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilliam, Matthew <hr/> Contributor address; City; State; Zip Code  Houston, TX 77024	Amount of Contribution (\$)  \$259.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Godfrey, Jonathan <hr/> Contributor address; City; State; Zip Code  Houston, TX 77025	Amount of Contribution (\$)  \$25.00
Contributor's Principal Occupation musician		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 11/22 Rpt: 14/38
<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 10/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerrero, Emmanuel	<b>7</b> Amount of Contribution (\$)  \$40.00
	<b>6</b> Contributor address; City; State; Zip Code  Pasadena, TX 77506	
<b>8</b> Contributor's Principal Occupation consultant		<b>9</b> Contributor's Job Title city council
<b>10</b> Contributor's employer/law firm Pasadena City Council		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halpern, Caitlin	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Houston, TX 77023	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Gibbs & Bruns		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Bryan	Amount of Contribution (\$)  \$500.00
	Contributor address; City; State; Zip Code  Katy, TX 77494	
Contributor's Principal Occupation ENGINEER		Contributor's Job Title Engineer
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 12/22 Rpt: 15/38
<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 10/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Luong, Jason <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002	<b>7</b> Amount of Contribution (\$)  \$259.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Law Office Jason Luong		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Macerola, Gianpaolo <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002	Amount of Contribution (\$)  \$3,000.00
Contributor's Principal Occupation attorney		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Macias, Alejandro <hr/> Contributor address; City; State; Zip Code  Houston, TX 77057	Amount of Contribution (\$)  \$259.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 13/22 Rpt: 16/38
2 FILER NAME Cornelio, Natalia M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084216
4 Date 10/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madrid, Mario	7 Amount of Contribution (\$) \$1,035.25
	6 Contributor address; City; State; Zip Code  Houston, TX 77098	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Madrid Law Firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Makany, Tanya	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Houston, TX 77047	
Contributor's Principal Occupation realtor		Contributor's Job Title realtor
Contributor's employer/law firm full circle		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Scott	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Katy, TX 77450-5042	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Federal Public Defender		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 14/22 Rpt: 17/38
2 FILER NAME Cornelio, Natalia M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084216
4 Date 10/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayr, Brent	7 Amount of Contribution (\$) \$259.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77007-8228	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norris, Danyahel	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Houston, TX 77044	
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm City of Houston		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patchen, Jerry	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77055	
Contributor's Principal Occupation Attorney		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 15/22 Rpt: 18/38
<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 09/20/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Julene <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77027	<b>7</b> Amount of Contribution (\$)  \$259.00
<b>8</b> Contributor's Principal Occupation nonprofit		<b>9</b> Contributor's Job Title nonprofit executive
<b>10</b> Contributor's employer/law firm Latinos for Education		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Matt <hr/> Contributor address; City; State; Zip Code  Houston, TX 77096-3847	Amount of Contribution (\$)  \$100.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Perez Law Group		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pitoniak, Nathaniel <hr/> Contributor address; City; State; Zip Code  Sugar Land, TX 77479	Amount of Contribution (\$)  \$100.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 16/22 Rpt: 19/38
<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 10/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reynal, Andino <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Contributor's Principal Occupation attorney		<b>9</b> Contributor's Job Title attorney
<b>10</b> Contributor's employer/law firm self		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Saenz, Daniel <hr/> Contributor address; City; State; Zip Code  houston, TX 77044	Amount of Contribution (\$)  \$50.00
Contributor's Principal Occupation IT consultant		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Saenz, Graciela <hr/> Contributor address; City; State; Zip Code  Houston, TX 77023	Amount of Contribution (\$)  \$150.00
Contributor's Principal Occupation attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Offices Graciela Saenz		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 17/22 Rpt: 20/38
<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 10/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Savoy, Bryan ..... <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm self		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scardino, Joseph Phillip ..... Contributor address; City; State; Zip Code  West University Pl, TX 77005	Amount of Contribution (\$)  \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scheiner, Grant ..... Contributor address; City; State; Zip Code  Houston, TX 77098-4096	Amount of Contribution (\$)  \$517.75
Contributor's Principal Occupation Managing Attorney		Contributor's Job Title Managing ATorney
Contributor's employer/law firm Scheiner Law Group		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 18/22 Rpt: 21/38
<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 10/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sedita, Sam <hr/> <b>6</b> Contributor address; City; State; Zip Code  Sugar Land, TX 77479	<b>7</b> Amount of Contribution (\$)  \$103.75
<b>8</b> Contributor's Principal Occupation student		<b>9</b> Contributor's Job Title n/a
<b>10</b> Contributor's employer/law firm n/a		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Silverman, Jed <hr/> Contributor address; City; State; Zip Code  Houston, TX 77008	Amount of Contribution (\$)  \$250.00
Contributor's Principal Occupation Lawyer		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office Jed Silverman		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sorola-Pohlman, Lenora <hr/> Contributor address; City; State; Zip Code  Houston, TX 77008	Amount of Contribution (\$)  \$517.75
Contributor's Principal Occupation Self employed		Contributor's Job Title President
Contributor's employer/law firm self employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 19/22 Rpt: 22/38
<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 10/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) St. John, Paul <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77008	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm solo/self		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tanner, Allen <hr/> Contributor address; City; State; Zip Code  Houston, TX 77096	Amount of Contribution (\$)  \$517.75
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Andy <hr/> Contributor address; City; State; Zip Code  Houston, TX 77035	Amount of Contribution (\$)  \$1,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 20/22 Rpt: 23/38
<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 10/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tobin, Jackie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77005	<b>7</b> Amount of Contribution (\$)  \$517.75
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Partner
<b>10</b> Contributor's employer/law firm Step toe LLP		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Touchstone, Stephen <hr/> Contributor address; City; State; Zip Code  Houston, TX 77008	Amount of Contribution (\$)  \$2,587.75
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino-Godfrey, Ana <hr/> Contributor address; City; State; Zip Code  Houston, TX 77025	Amount of Contribution (\$)  \$259.00
Contributor's Principal Occupation education		Contributor's Job Title Owner
Contributor's employer/law firm Prelude Music School		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 21/22 Rpt: 24/38
<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 10/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wells, Joe <hr/> <b>6</b> Contributor address; City; State; Zip Code  Missouri City, TX 77459	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title attorney
<b>10</b> Contributor's employer/law firm self		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Willoughby, Joshua <hr/> Contributor address; City; State; Zip Code  Houston, TX 77006-5444	Amount of Contribution (\$)  \$250.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilson, Kathryn <hr/> Contributor address; City; State; Zip Code  Katy, TX 77450	Amount of Contribution (\$)  \$259.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Harris County Public Defender		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 22/22 Rpt: 25/38
<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 10/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) sharon, trevor	<b>7</b> Amount of Contribution (\$)  \$75.00
	<b>6</b> Contributor address; City; State; Zip Code  houston, TX 77006	
<b>8</b> Contributor's Principal Occupation attorney		<b>9</b> Contributor's Job Title attorney
<b>10</b> Contributor's employer/law firm Paul Doyle and Associates		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
<b>Date</b> 09/25/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) sullivan, james	<b>Amount of Contribution (\$)</b>  \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Cypress, TX 77429	
<b>Contributor's Principal Occupation</b> attorney		<b>Contributor's Job Title</b> attorney
<b>Contributor's employer/law firm</b>		<b>Law firm of contributor's spouse (if any)</b>
<b>If contributor is a child, law firm of parent(s) (if any)</b>		
<b>Date</b> 09/27/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) sullivan, james	<b>Amount of Contribution (\$)</b>  \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Cypress, TX 77429	
<b>Contributor's Principal Occupation</b> attorney		<b>Contributor's Job Title</b>
<b>Contributor's employer/law firm</b>		<b>Law firm of contributor's spouse (if any)</b>
<b>If contributor is a child, law firm of parent(s) (if any)</b>		

# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/13 Rpt: 26/38	<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 11/04/2024	<b>5</b> Payee name A matter of taste	
<b>6</b> Amount (\$) \$810.13	<b>7</b> Payee address; City; State; Zip Code 3631 Shady Grove Dr  Manel , TX 77578	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food catering for election night party
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/22/2024	Payee name American Leadership Forum	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1801 Main street  houston, TX 77002	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual Dinner ticket
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/19/2024	Payee name Barnaby's Cafe	
Amount (\$) \$57.63	Payee address; City; State; Zip Code 801 Congress  Houston, TX 77002	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff 1:1 lunch meeting
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.

<b>1</b> Total pages Schedule F1: Sch: 2/13 Rpt: 27/38	<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 08/19/2024	<b>5</b> Payee name Bay Area Democratic Movement	
<b>6</b> Amount (\$) \$150.00	<b>7</b> Payee address; City; State; Zip Code PO Box 590383  Houston, TX 77259	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Bay Area Democratic Movement GOTV
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/15/2024	Payee name Bravery Chef Hall	
Amount (\$) \$28.21	Payee address; City; State; Zip Code 409 Travis St  Houston, TX 77002	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch meeting - staff 1:1
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/05/2024	Payee name Bravery Chef Hall	
Amount (\$) \$30.78	Payee address; City; State; Zip Code 409 Travis St  Houston, TX 77002	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch meeting Mental Health Court team
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.

<b>1</b>	Total pages Schedule F1: Sch: 3/13 Rpt: 28/38	<b>2</b>	FILER NAME Cornelio, Natalia M. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00084216
<b>4</b>	Date 07/17/2024	<b>5</b>	Payee name HEB		
<b>6</b>	Amount (\$) \$191.08	<b>7</b>	Payee address; City; State; Zip Code 6055 South FWY  Houston, TX 77004		
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense coffee, tea, snacks, for jurors		
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 08/12/2024		Payee name Harris County Democratic Party		
	Amount (\$) \$4,500.00		Payee address; City; State; Zip Code 4619 Lyons ave  Houston, TX 77020		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to party for annual JJR dinner		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/19/2024		Payee name La Calle		
	Amount (\$) \$137.54		Payee address; City; State; Zip Code 909 Franklin St  Houston, TX 77002		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense end of year mental health court gathering, food and beverage for team		
		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.

<b>1</b>	Total pages Schedule F1: Sch: 4/13 Rpt: 29/38	<b>2</b>	FILER NAME Cornelio, Natalia M. (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00084216
<b>4</b>	Date 11/25/2024	<b>5</b>	Payee name Marriott		
<b>6</b>	Amount (\$) \$255.84	<b>7</b>	Payee address; City; State; Zip Code 777 Watters Creek Boulevard  Allen, TX 75013		
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel expense for Judicial Summit on Mental Health		
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/04/2024		Payee name NGP Van Inc		
	Amount (\$) \$159.90		Payee address; City; State; Zip Code 1445 New York Ave NW  Washington, DC 20005		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense NGP Van fees		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/05/2024		Payee name NGP Van Inc		
	Amount (\$) \$159.90		Payee address; City; State; Zip Code 1445 New York Ave NW  Washington, DC 20005		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense NGP Van fee		
		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.

<b>1</b> Total pages Schedule F1: Sch: 5/13 Rpt: 30/38	<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 10/04/2024	<b>5</b> Payee name NGP Van Inc	
<b>6</b> Amount (\$) \$159.90	<b>7</b> Payee address; City; State; Zip Code 1445 New York Ave NW  Washington, DC 20005	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense NGP van
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2024	Payee name NGP Van Inc	
Amount (\$) \$159.90	Payee address; City; State; Zip Code 1445 New York Ave NW  Washington, DC 20005	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense nap van
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/12/2024	Payee name NGP Van Inc	
Amount (\$) \$159.90	Payee address; City; State; Zip Code 1445 New York Ave NW  Washington, DC 20005	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense NGP van expense
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.

<b>1</b> Total pages Schedule F1: Sch: 6/13 Rpt: 31/38	<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00084216
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<b>4</b> Date 08/05/2024	<b>5</b> Payee name NGP Van Inc
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<b>6</b> Amount (\$) \$159.90	<b>7</b> Payee address; City; State; Zip Code 1445 New York Ave NW  Washington, DC 20005
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense NGP Van fees
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/08/2024	Payee name Nasrullah, Mohammed
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Amount (\$) \$200.00	Payee address; City; State; Zip Code 13515 Robin Hill C  Houston, TX 77059
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GOTV Precinct 718
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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 12/02/2024	Payee name Paragon Payment Solutions
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Amount (\$) \$25.00	Payee address; City; State; Zip Code 2141 East Broadway Rd Suite 202 Tempe, AZ 85282
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense vendor fee - payment processing
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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.

<b>1</b> Total pages Schedule F1: Sch: 7/13 Rpt: 32/38	<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 11/04/2024	<b>5</b> Payee name Paragon Payment Solutions	
<b>6</b> Amount (\$) \$812.50	<b>7</b> Payee address; City; State; Zip Code 2141 East Broadway Rd Suite 202 Tempe, AZ 85282	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense vendor fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/02/2024	Payee name Paragon Payment Solutions	
Amount (\$) \$221.17	Payee address; City; State; Zip Code 2141 East Broadway Rd Suite 202 Tempe, AZ 85282	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense vendor fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/03/2024	Payee name Paragon Payment Solutions	
Amount (\$) \$41.23	Payee address; City; State; Zip Code 2141 East Broadway Rd Suite 202 Tempe, AZ 85282	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense vendor fees
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.

<b>1</b> Total pages Schedule F1: Sch: 8/13 Rpt: 33/38	<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00084216
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<b>4</b> Date 08/02/2024	<b>5</b> Payee name Paragon Payment Solutions
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<b>6</b> Amount (\$) \$25.00	<b>7</b> Payee address; City; State; Zip Code 2141 East Broadway Rd Suite 202 Tempe, AZ 85282
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense vendor fee
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/02/2024	Payee name Paragon Payment Solutions
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Amount (\$) \$25.00	Payee address; City; State; Zip Code 2141 East Broadway Rd Suite 202 Tempe, AZ 85282
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense vendor fees
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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 12/20/2024	Payee name Post Houston
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Amount (\$) \$490.93	Payee address; City; State; Zip Code 401 Franklin  Houston, TX 77002
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food and beverages for end of year staff gathering
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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.

<b>1</b> Total pages Schedule F1: Sch: 9/13 Rpt: 34/38	<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 10/21/2024	<b>5</b> Payee name Potente	
<b>6</b> Amount (\$) \$270.23	<b>7</b> Payee address; City; State; Zip Code 1515 Texas Ave  Houston, TX 77002	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Thank you dinner for fundraiser volunteers
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/24/2024	Payee name Ramirez, Erika	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 1201 Franklin St  Houston, TX 77002	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food expense for Hispanic Judges Hispanic Heritage Month Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/19/2024	Payee name Southwest Democrats	
Amount (\$) \$500.00	Payee address; City; State; Zip Code PO Box 2053  Bellaire, TX 77402	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) GOTV expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GOTV expense
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.

<b>1</b> Total pages Schedule F1: Sch: 10/13 Rpt: 35/38	<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00084216
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<b>4</b> Date 09/05/2024	<b>5</b> Payee name Texas Association of District Judges
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<b>6</b> Amount (\$) \$25.00	<b>7</b> Payee address; City; State; Zip Code 201 Caroline  Houston, TX 77002
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TADJ membership fees
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/04/2024	Payee name Texas Bar Foundation
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Amount (\$) \$2,700.00	Payee address; City; State; Zip Code 515 Congress Ave  Austin, TX 78701
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texas Car Foundation Fellow Fee
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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 08/27/2024	Payee name Texas Latinx Judges
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Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 90683  San Antonio, TX 78209
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lifetime membership fee
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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.

<b>1</b> Total pages Schedule F1: Sch: 11/13 Rpt: 36/38	<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00084216
<b>4</b> Date 08/26/2024	<b>5</b> Payee name Thai Cafe	
<b>6</b> Amount (\$) \$42.20	<b>7</b> Payee address; City; State; Zip Code 917 Franklin  Houston, TX 77002	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff 1:1 Lunch meeting
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/23/2024	Payee name Topgolf	
Amount (\$) \$493.79	Payee address; City; State; Zip Code 21401 Gulf Fwy  Webster, TX 77598	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff team building
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/24/2024	Payee name U.S. Post Office	
Amount (\$) \$25.80	Payee address; City; State; Zip Code 1500 Hadley  Houston, TX 77002	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense purchase stamps for campaign related mail
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.

<b>1</b> Total pages Schedule F1: Sch: 12/13 Rpt: 37/38	<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00084216
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<b>4</b> Date 11/05/2024	<b>5</b> Payee name Whole Foods
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<b>6</b> Amount (\$) \$64.43	<b>7</b> Payee address; City; State; Zip Code 701 Waugh St  Houston, TX 77007
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food and beverage for Election Day gathering
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/18/2024	Payee name Williams, Stedmond
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Amount (\$) \$150.00	Payee address; City; State; Zip Code  Houston, TX 77002
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment for security for fundraiser
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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 09/03/2024	Payee name Wix
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Amount (\$) \$571.56	Payee address; City; State; Zip Code 100 Gansevoort  New York, NY 10014
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</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 domain vendor
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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  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/13 Rpt: 38/38	<b>2</b> FILER NAME Cornelio, Natalia M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00084216
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<b>4</b> Date 12/06/2024	<b>5</b> Payee name Wreaths Across America
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<b>6</b> Amount (\$) \$17.00	<b>7</b> Payee address; City; State; Zip Code 4582 Kingwood Dr 247 Kingwood, TX 77345
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship of Wreath for Annual laying of wreaths event at Veterans Cemetery
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/23/2024	Payee name chicken and pickle
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Amount (\$) \$283.33	Payee address; City; State; Zip Code 210 Blue Heron Dr  Webster, TX 77598
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense staff team building day
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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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