FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00084199 35 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Dawn Deshea NAME Date Received **ELECTRONICALLY FILED** 01/15/2025 NICKNAME LAST **SUFFIX** Rogers CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 6037 N. Fry Rd. MAILING Receipt # Amount **ADDRESS** Suite 126-539 Change of Address Houston, TX 77449 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Stacia NAME NICKNAME LAST **SUFFIX** Wilson **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER** 19518 Brittany Creek Dr. **ADDRESS** (Residence or Business) Spring, TX 77388 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (281) 924-0250 **PHONE** REPORT TYPE 30th day before election Runoff 15th day after campaign treasurer January 15 lx| appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 07/01/2024 12/31/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/05/2024 χ General Special

Forms provided by Texas Ethics Commission

11 OFFICE

OFFICE HELD (if any)

District Judge District 334 Harris

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12 OFFICE SOUGHT (if known)

District Judge

Version V4.1.0.5dd2ace2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 35

13 C / OH NAME	Rogers, Dawn Deshe	a (The Honorable)	14 Filer ID 00084199	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures may have been	itical expenditures made by political c made without the candidate's or office this information only if they receive no	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASU	IRER NAME	
		COMMITTEE CAMPAIGN TREASU	IRER ADDRESS	
16 CONTRIBUTION	1. TOTAL UNITEM	ZED POLITICAL CONTRIBUTIONS	(OTHER THAN PLEDGES, LOANS,	
TOTALS		ES OF LOANS, OR CONTRIBUTION	NS MADE ELECTRONICALLY)	\$ 0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTE	EES OF LOANS)	\$ 43,588.21
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLIT	CAL EXPENDITURES		\$ 21,803.63
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED RIOD	AS OF THE LAST DAY OF THE	\$ 170,050.46
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDIN TING PERIOD	IG LOANS AS OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
			, under penalty of perjury, that the acand includes all information required thection Code.	
			The Honorable Dawn Deshea Ro	ogers
			Signature of Candidate or Officeho	lder
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and sea		
Signature of office	cer administering oath	Printed name of officer adminis	stering oath Title of office	r administering oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

					3 of 35
18 FILE		ME rawn Deshea (The Honorable)	19 Filer ID 00084199	(Eth	nics Commission Filers)
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	33,925.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	9,663.21
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	21,803.63
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	
7. 8. 9. 10.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS FRO	OF C/OH ONS	\$ \$ \$ \$	

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE	A(J)1
	The Instruction Guide explains how to complete this form.					l pages Schedule A(J)1 : 1/13 Rpt: 4/35	i
2	FILER NAME Rogers, Dav	LER NAME ogers, Dawn Deshea (The Honorable)			ID (Ethics Commissi 84199	on Filers)	
4	Date 5 Full name of contributor out-of-state PAC (ID#:) 7 ABEL, MANJI 6 Contributor address; City; State; Zip Code		7 Amo	unt of Contribution (\$)	\$2,000.00		
		SUGAR LAND, TX 7747	79				
8		Principal Occupation		9 Contributor's Job Title			
L	ATTORNEY			ATTORNEY			
10		employer/law firm _AWJI, PLLC		11 Law firm of contributor's sp	oouse (IT a	any)	
12		s a child, law firm of parent(s) (i	f any)	<u>I</u>			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amo	unt of Contribution (\$)	
	10/10/2024	ADROGUE, MATTIAS Contributor address; City; HOUSTON, TX 77006	State; Zip Code				\$500.00
	Contributor's I	Principal Occupation		Contributor's Job Title			
	ATTORNEY			ATTORNEY			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if a	any)	
	MATIAS J. A	ADROGUE, PLLC		MATIAS J. ADROGUE,	PLLC		
	If contributor is	s a child, law firm of parent(s) (i	f any)				
	Date	Full name of contributor	out-of-state PAC (ID#:		Amo	ount of Contribution (\$)	
	10/22/2024	ALI, SHOWKAT Contributor address; City;	State; Zip Code				\$500.00
		SPRING, TX 77379					
		Principal Occupation		CONTRACTOR			
	Contributor's	employer/law firm		CONTRACTOR Law firm of contributor's sp	agusa (if s	amu)	
	ARCHPOIN			Law IIIII of Contributor's Sp	Jouse (II a	arry)	
		s a child, law firm of parent(s) (i	f any)				

	MONET	ARY POLITICAL CONTRIBUTI	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 2/13 Rpt: 5/35
2	FILER NAME	ILER NAME		3 Filer ID (Ethics Commission Filers)
	Rogers, Dav	gers, Dawn Deshea (The Honorable)		00084199
4	Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7 Amount of Contribution (\$)
	10/10/2024 BRAND, LEON		\$250.00	
		6 Contributor address; City; State; Zip Code		
		CYPRESS, TX 77433		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
	FINANCIAL	ADVISOR	FINANCIAL ADVISOR	
10	Contributor's	employer/law firm	11 Law firm of contributor's s	pouse (if any)
12		s a child, law firm of parent(s) (if any)		
F	Dete			
	Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
	07/22/2024	BRANTLEY, PHILLIP		\$200.00
		Contributor address; City; State; Zip Code SUGARLAND, TX 77479		
_	Contributorio		Contributorio Joh Titlo	
	ATTORNEY	Principal Occupation	Contributor's Job Title ATTORNEY	
		employer/law firm ANTLEY & ASSOCIATES	Law firm of contributor's s	pouse (ii any)
	ii contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor uut-of-state PAC (ID#	#:)	Amount of Contribution (\$)
	10/28/2024	BROWN, LORI		\$250.00
		Contributor address; City; State; Zip Code		
		PLEDGER, TX 77468		
		Principal Occupation	Contributor's Job Title	
	ATTORNEY		ATTORNEY	
		employer/law firm	Law firm of contributor's s	pouse (if any)
	BROWN & N	MUSSLEWHITE LTD		
	If contributor i	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL CONTRIBUT	ΓΙΟ	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete th	is f	form.	1	Total pages Schedule A(J)1: Sch: 3/13 Rpt: 6/35
2	FILER NAME Rogers, Dawn Deshea (The Honorable)		3	Filer ID (Ethics Commission Filers) 00084199		
4	Date 07/22/2024			7	Amount of Contribution (\$) \$1,000.00	
8	Contributor's I	I Principal Occupation		9 Contributor's Job Title	<u> </u>	
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	ous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)		<u> </u>		
	Date 12/30/2024	Full name of contributor out-of-state PAC (COLLUM, JAMES Contributor address; City; State; Zip Code	(ID#:_		•	Amount of Contribution (\$) \$500.00
		HOUSTON, TX 77265		_		
		Principal Occupation		Contributor's Job Title		
	ATTORNEY			ATTORNEY		on (if any)
		employer/law firm SHUA COLLUM PC		Law firm of contributor's sp	ous	se (II ally)
		s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor ut-of-state PAC ((ID#:_)		Amount of Contribution (\$)
	07/22/2024	CRIM & VILLALPANDO, PC Contributor address; City; State; Zip Code HOUSTON, TX 77092				\$250.00
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A(J)1: Sch: 4/13 Rpt: 7/35
2	FILER NAME Rogers, Dav	ER NAME gers, Dawn Deshea (The Honorable)		3	Filer ID (Ethics Commission Filers) 00084199	
4	4 Date 09/30/2024 5 Full name of contributor out-of-state PAC (ID#:) DUBROWSKI STAFFORD & PIERCE LLP 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$2,500.00		
		Houston, TX 77007				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title ATTORNEY		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	pous	ee (if any)
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date 10/04/2024	Full name of contributor GARCIA, ORLANDO F. Contributor address; City;	out-of-state PAC (ID#:			Amount of Contribution (\$) \$1,000.00
	Contributor's I	MCALLEN, TX 78504 Principal Occupation		Contributor's Job Title		
	ATTORNEY			ATTORNEY		
	ORLANDO (employer/law firm GARCIA LAW FIRM, PLLC s a child, law firm of parent(s) (if	f any)	Law firm of contributor's s	pous	ee (if any)
H	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	10/04/2024	GARCIA, RAMON Contributor address; City;	<u> </u>			\$500.00
		EDINBURG, TX 78539				
	Contributor's I	Principal Occupation		Contributor's Job Title ATTORNEY		
	Contributor's	employer/law firm		Law firm of contributor's sp	pous	e (if any)
		GARCIA LAW FIRM, PLLC				
	If contributor is	s a child, law firm of parent(s) (if	fany)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 5/13 Rpt: 8/35
2	FILER NAME Rogers, Dav	ER NAME gers, Dawn Deshea (The Honorable)		3	Filer ID (Ethics Commission Filers) 00084199	
4	4 Date 07/22/2024 5 Full name of contributor out-of-state PAC (ID#:) HAGANS, WILLIAM FRED 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$500.00		
		HOUSTON, TX 77006				
8		Principal Occupation		9 Contributor's Job Title		
_	ATTORNEY			ATTORNEY		or (it am)
10	HAGANS	employer/law firm		11 Law firm of contributor's sp	ous	se (II any)
12	2 If contributor is	s a child, law firm of parent(s) (if	any)	1		
	Date 07/22/2024	Full name of contributor HIGGINS, RYAN	out-of-state PAC (ID#:			Amount of Contribution (\$) \$250.00
		Contributor address; City; S HOUSTON, TX 77010	ыме, Zip Coue			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	ATTORNEY			ATTORNEY		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
		RDIN & ASSOCIATES				
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/28/2024	HOGAN, CHRISTOPER				\$1,000.00
		Contributor address; City; S	State; Zip Code			
		HOUSTON, TX 77002				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	ATTORNEY			ATTORNEY		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
		OMPSON SCHUELKE, LLP	on d			
	ii continuutoi ii	s a child, law firm of parent(s) (if	arry)			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.				Total pages Schedule A(J)1: Sch: 6/13 Rpt: 9/35
2	FILER NAME Rogers, Dav	vn Deshea (The Honorable)		3	Filer ID (Ethics Commission Filers) 00084199
4	4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7		7	Amount of Contribution (\$) \$125.00	
		CHICAGO, IL 60620			
8	Contributor's FENGINEER	Principal Occupation	9 Contributor's Job Title ENGINEER		
10	CITY OF CH	employer/law firm	11 Law firm of contributor's sp	oous	se (if any)
12		s a child, law firm of parent(s) (if any)			
	Date 07/22/2024	Full name of contributor out-of-state PAC (ID#:_ JAVIER MARCOS ABOGO DE ACCIDENTES Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$5,000.00
		HOUSTON, TX 77006			
	Contributor's F	Principal Occupation	Contributor's Job Title		
	Contributor's 6	employer/law firm	Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if any)	<u> </u>		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/20/2024	JIM ADLER & ASSOCIATES Contributor address; City; State; Zip Code			\$5,000.00
	Contributorio [Houston, TX 77027	Contributorio lob Titlo		
	Contributors	Principal Occupation	Contributor's Job Title		
	Contributor's 6	employer/law firm	Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if any)			

	MONET	ARY POLITICAL CONTRIBUTION	DNS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this 1	1 Total pages Schedule A(J)1: Sch: 7/13 Rpt: 10/35	
2	FILER NAME Rogers, Dav	vn Deshea (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084199
4	Date 5 Full name of contributor out-of-state PAC (ID#:) 7 12/23/2024 Jeffrey, Newport 6 Contributor address; City; State; Zip Code Houston, TX 77024		7 Amount of Contribution (\$) \$1,000.00	
8	Contributor's I	I Principal Occupation	9 Contributor's Job Title	<u> </u>
	Attorney		Attorney	
10		employer/law firm EWPORT LAW OFFICES	11 Law firm of contributor's sp	ouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)	I	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	07/31/2024	LAW OFFICE OF DOMINGO GARCIA LLP Contributor address; City; State; Zip Code DALLAS, TX 75243		\$1,000.00
	Contributor's F	Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's sp	ouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)	<u> </u>	
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	07/19/2024	LAW OFFICE OF JAS JORDAN, PLLC Contributor address; City; State; Zip Code HOUSTON, TX 77051		\$500.00
	Contributor's I	Principal Occupation	Contributor's Job Title	<u> </u>
	Contributor's e	employer/law firm	Law firm of contributor's sp	ouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A(J)1: Sch: 8/13 Rpt: 11/35	
2	FILER NAME Rogers, Dav	R NAME ers, Dawn Deshea (The Honorable)		3	Filer ID (Ethics Commission Filers) 00084199	
4	4 Date 07/28/2024 5 Full name of contributor out-of-state PAC (ID#:) Law Offices of Jeffrey R. Newport 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$1,000.00		
		Houston, TX 77024				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	ous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if ar	ny)			
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)
	07/22/2024	MALLEY LAW FIRM, PLLC Contributor address; City; Sta				\$500.00
		BEAUMONT, TX 77706				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if ar	ny)			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)
	07/19/2024	MANJI & ASSOCIATES, P	C			\$500.00
		Contributor address; City; Sta	tte; Zip Code		•	
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if ar	ny)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 9/13 Rpt: 12/35
2	FILER NAME Rogers, Dav	ER NAME ogers, Dawn Deshea (The Honorable)		1	Filer ID (Ethics Commission Filers) 00084199	
4	5 Full name of contributor out-of-state PAC (ID#:) 10/10/2024 PARKER, DERRICK 6 Contributor address; City; State; Zip Code		—	Amount of Contribution (\$) \$500.00		
		MISSOURI CITY, TX 77	459			
8	Contributor's F	Principal Occupation		9 Contributor's Job Title ATTORNEY		
10		employer/law firm		11 Law firm of contributor's sp	ากแระ	(if any)
		R LAW FIRM				, (i. ay)
12	If contributor is	s a child, law firm of parent(s) (if	any)	•		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	07/22/2024	PATRICK M. FLYNN, A Contributor address; City; HOUSTON, TX 77008				\$500.00
-	Contributor's F	Principal Occupation		Contributor's Job Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oouse	e (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	I .		
	Date	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)
	09/10/2024	PAXTON, RICHARD Contributor address; City;	State; Zip Code			\$500.00
		houston, TX 77056				
		Principal Occupation		Contributor's Job Title		
_	ATTORNEY Contributor's (employer/law firm		ATTORNEY Law firm of contributor's sp	20110	o (if any)
	PAXTON LA			Law IIIII of Contributor's Sp	Joust	e (ii arry)
		s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL CONTRIBU	TIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete th	nis form.	1 Total pages Schedule A(J)1: Sch: 10/13 Rpt: 13/35
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Rogers, Dav	vn Deshea (The Honorable)		00084199
4	Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of Contribution (\$)
	10/10/2024	PIGG, RYAN		\$500.00
		6 Contributor address; City; State; Zip Code		
		HOUSTON, TX 77006		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
	ATTORNEY		ATTORNEY	
10	Contributor's	employer/law firm	11 Law firm of contributor's s	spouse (if any)
		BEE LAWFIRM		
12	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of Contribution (\$)
	07/18/2024	RODEN, JOE M.		\$100.00
		Contributor address; City; State; Zip Code		·· ·
		HOUSTON, TX 77010		
	Contributor's	I Principal Occupation	Contributor's Job Title	
	ATTORNEY		PARTNER	
	Contributor's	employer/law firm	Law firm of contributor's s	spouse (if any)
		RDIN & ASSOCIATES, LLP		
		s a child, law firm of parent(s) (if any)		
H	Date	Full name of contributor	(104)	Amount of Contribution (\$)
	07/18/2024	Full name of contributor out-of-state PAC (RUSSEL, HARDIN	(ID#)	\$1,000.00
	07/10/2024			
		Contributor address; City; State; Zip Code		
		HOUSTON, TX 77005		
	Contributorio		Contributorio Job Titlo	
	ATTORNEY	Principal Occupation	Contributor's Job Title ATTORNEY	
				C.F
		employer/law firm	Law firm of contributor's s	spouse (if any)
		RDIN & ASSOCIATES		
	If contributor i	s a child, law firm of parent(s) (if any)		
l				

	MONET	ARY POLITICAL (CONTRIBUTIO	DNS		SCHEDULE A(J)1
	The Instru	ction Guide explains hov	1	Total pages Schedule A(J)1: Sch: 11/13 Rpt: 14/35		
2	FILER NAME	vn Deshea (The Honorable)			3	Filer ID (Ethics Commission Filers) 00084199
4	Date 10/10/2024	Full name of contributor SIMS, LIONEL Contributor address; City; S	7	Amount of Contribution (\$) \$500.00		
		HOUSTON, TX 77030				
8	Contributor's I	Principal Occupation				
10	Contributor's	employer/law firm	oous	se (if any)		
12		s a child, law firm of parent(s) (if	any)			
	Date Full name of contributor out-of-state PAC (ID#:) 07/18/2024 SONNIER, MARK Contributor address; City; State; Zip Code					Amount of Contribution (\$) \$250.00
		HOUSTON, TX 77085				
		Principal Occupation		Contributor's Job Title		
	ATTORNEY			ATTORNEY		(1)
	MDS LAW	employer/law firm		Law firm of contributor's sp	ous	se (If any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:_)	Π	Amount of Contribution (\$)
	07/22/2024	THE FELDMAN LAW FIF Contributor address; City; S			•	\$500.00
	0	HOUSTON, TX 77057		I 0 17 1 1 1 7 1		
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	L		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	1	Total pages Schedule A(J)1: Sch: 12/13 Rpt: 15/35		
2	FILER NAME Rogers, Dav	vn Deshea (The Honorable)		3	Filer ID (Ethics Commission Filers) 00084199	
4	Date 07/22/2024	5 Full name of contributor THE HADI LAW FIRM 6 Contributor address; City;	7	Amount of Contribution (\$) \$1,000.00		
		HOUSTON, TX 77036				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Ι	Amount of Contribution (\$)
	07/20/2024	TORRENCE, TRAVIS Contributor address; City;		\$500.00		
		HOUSTON, TX 77079		T		
	Contributor's I	Principal Occupation		Contributor's Job Title ATTORNEY		
		employer/law firm			2011	on (if any)
	SHELL USA			Law firm of contributor's sp	Jous	se (II arry)
_		s a child, law firm of parent(s) (if	f any)			
L	Data	Full record of controllers			_	Amount of Ocutalization (b)
	Date 10/25/2024	Full name of contributor WASHINGTON, MICKE	out-of-state PAC (ID#:)		Amount of Contribution (\$) \$250.00
	10/20/202	Contributor address; City;				\$200.00
		HOUSTON, TX 77004				
		Principal Occupation		Contributor's Job Title		
	ATTORNEY			ATTORNEY		or (thous)
		employer/law firm ON & ASSOCIATES		Law firm of contributor's sp	oous	se (if any)
		s a child, law firm of parent(s) (il	f any)			

	MONET	ARY POLITICAL C	CONTRIBUTIO	DNS			SCHEDULE	A(J)1
	The Instru	ction Guide explains how	1		ges Schedule A(J) /13 Rpt: 16/35	1:		
2	FILER NAME Rogers, Dav	wn Deshea (The Honorable)		3		(Ethics Commiss	sion Filers)	
4	Date 07/22/2024	Full name of contributor WRIGHT CLOSE & BARC Contributor address; City; St	7	Amount o	of Contribution (\$)	\$1,000.00		
		HOUSTON, TX 77056						
8	Contributor's I	Principal Occupation		9 Contributor's Job Title				
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)		
12	! If contributor is	is a child, law firm of parent(s) (if a	้ ลกy)					
Date O7/22/2024 Full name of contributor out-of-state PAC (ID#:) Ware, Jackson, Lee, O'Neill, Smith & Barrow LLP Contributor address; City; State; Zip Code					•	Amount of	of Contribution (\$)	\$1,000.00
	Contributor's I	Houston, TX 77019 Principal Occupation		Contributor's Job Title	<u> </u>			
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)		
	If contributor is	is a child, law firm of parent(s) (if a	any)	L				

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/2 Rpt: 17/35						
2 FILER NAME Rogers, Dav	wn Deshea (The Honorable)		3 Filer ID (Ethic 00084199	es Commission Filers)				
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$					
5 Date 07/18/2024	 Full name of contributor		9 In-kind contribution description FOOD/DRINK FOR FUNDRAISER					
	HOUSTON, TX 77008		Check if travel of	l outside of Texas. Complete Schedule T.				
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See ii	nstructions)				
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL)	(See instructions)				
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)				
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date 07/18/2024	Full name of contributor out-of-state PAC (ID#: GARCIA, JESUS Contributor address; City; State; Zip Code)		In-kind contribution description I FOOD/DRINK FOR FUNDRAISER				
	HOUSTON, TX 77098		Check if travel of	I I outside of Texas. Complete Schedule T.				
Principal occı	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See ii	nstructions)				
Contributor's ATTORNEY	principal occupation (FOR JUDICIAL)	Contributor's job title PARTNER	(FOR JUDICIAL)	(See instructions)				
Contributor's KHERKER	employer/law firm (FOR JUDICIAL) GARCIA	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date 07/18/2024	Full name of contributor out-of-state PAC (ID#: Kherkher, Steven Contributor address; City; State; Zip Code		Amount of contribution (\$) \$2,415.80	In-kind contribution description I FOOD/DRINK FOR FUNDRAISER				
Houston, TX 77098 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions)								
Contributor's Attorney	principal occupation (FOR JUDICIAL)	Contributor's job title PARTNER	(FOR JUDICIAL)	(See instructions)				
	employer/law firm (FOR JUDICIAL) GARCIA, LLP	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 18/35 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Rogers, Dawn Deshea (The Honorable) 00084199 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 07/18/2024 Lowenberg Law Firm \$2,415.80 FOOD/DRINK FOR 7 Contributor address; City; State; Zip Code FUNDRAISER HOUSTON, TX 77024 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Food/Beverage Expense Polling Expense Frinting Expense Food/Beverage Expense Printing Expense Travel in District Travel Out of District Salaries/Wages/Contract Labor OTHER (enter a category not listed a The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commis	sion Filers)
	Sch: 1/17 Rpt: 19/35	Rogers, Dawn Deshea (The Honorable) 00084199	
4	Date	5 Payee name	
	10/23/2024	2020 MARKET SCRATCH KITCHEN	
6	Amount (\$) \$33.68	7 Payee address; City; State; Zip Code 1500 RIVERY BLVD GEORGETOWN, TX 78628	
Ļ			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DINING WHILE ATTENDING REQ'D FAN VIOLENCE CLE	IILY
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	10/23/2024	2020 MARKET SCRATCH KITCHEN	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$15.00	1500 RIVERY BLVD	
		GEORGETOWN, TX 78628	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DINING WHILE WHILE ATTENDING RECEPTAMILY VIOLENCE CLE	QUIRED
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	11/01/2024	ACT BLUE	
	Amount (\$) \$80.63		
		Somerville, MA 02144	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ACT BLUE SERVICE FEES	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

1 Total pages Schedule F1: Sch: 217 Rpt: 20/35 Rogers, Dawn Deshea (The Honorable) 3 Filer ID (Ethics Commission Filers) 00084199		Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
4 Date	1	Total pages Schedule F1:	
11/14/2024 Amazon 8 PURPOSE OF EXPENDITURE (a) Category (see casegores listed at the top of this schedule) 9 Complete ONLY if direct expenditure to benefit C/OH Amazon Amount (s) Payee name 10/21/2024 Payee address; City; State; Zip Code 410 Terry Ave. N Seattle , WA 981.09 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Fig. Code (see Categories listed at the top of this schedule) Purpose OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Furpose OF EXPENDITURE (b) Description Check if more quicking in Towas. Complete Schedule T. Check Austin, TX, officefolder Name of this schedule) Gift/Awards/Memorials Expense (b) Description Check if more quicking in Towas. Complete Schedule T. Check and Towas. Complete Schedule T. Candidate/Officeholder name Office sought Office held Payee name BEST BUY Amount (s) Payee address; City; State; Zip Code \$1,050.00 Payee address; City; State; Zip Code \$1,050.00 \$1,050.00 Category (see Categories listed at the top of this schedule) Complete ONLY if direct EXPENDITURE (b) Description Check if more quicking in Towas. Complete Schedule T. Check if more quicking in Towas. Complete Schedule T. Check if more quicking in Towas. Complete Schedule T. Check if more quicking in Towas. Complete Schedule T. Check if more quicking in Towas. Complete Schedule T. Check if more quicking in Towas. Complete Schedule T. Check if more quicking in Towas. Complete Schedule T. Check if more quicking in Towas. Complete Schedule T. Check if more quicking in Towas. Complete Schedule T. Check if more quicking in Towas. Complete Schedule T. Check if more quicking in Towas. Complete Schedule T. Check if more quicking in Towas. Complete Schedule T. Check if more quicking in Towas. Complete Schedule T. Check if more quicking in Towas. Complete Schedule T. Check if more quicking in Towas. Complete Schedule T. Check if more quicking in Towas. Complete Schedule T. Check if more quicking in Towa		Sch: 2/17 Rpt: 20/35	Rogers, Dawn Deshea (The Honorable) 00084199
Amount (S) S43.25 7 Payee address; City; State; Zip Code	4	Date	5 Payee name
Seattle , WA 98109 8		11/14/2024	Amazon
Seattle , WA 98109 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if Invet outside of Texas, Complete Schedule T. Check if Austin, Tx, officeholder hing expense OFFICE SUPPLIES FOR JURY ROOM 9 Complete ONLY if direct expenditure to benefit C/OH Date	6	Amount (\$)	7 Payee address; City; State; Zip Code
PURPOSE OF EXPENDITURE		\$43.25	410 Terry Ave. N
PURPOSE OF EXPENDITURE			
Office Overhead/Rental Expense Office Overhead/Rental Expense Office Sught Office A Austin, Tx, officeholder Invite perpense OFFICE SUPPLIES FOR JURY ROOM Payee name 10/21/2024 Amazon Amount (\$) Payee address; City, State; Zip Code 410 Terry Ave. N Seattle , WA 98109 PURPOSE OF EXPENDITURE Office At favel outside of Texas. Complete Schedule T. Check # Austin, Tx, officeholder living expense Giff/Awards/Memorials Expense Office Sought Office held Office held Office held Date Organical Austin, Tx, officeholder living expense GIFF FOR COURT STAFF Complete QNLY if direct expenditure to benefit C/OH Date Office Sought Office held Payee name BEST BUY Amount (\$) Payee address; City; State; Zip Code Affice Sought Office held Office held Payee name BEST BUY Amount (\$) Payee address; City; State; Zip Code 410 Terry Ave. N Seattle , WA 98109 Office held Office Overhead/Rental Expense CAMPAIGN LAPTOP AND MICROSOFT SUBSCRIPTION Office held Office held Office held Office held			Seattle , WA 98109
Complete ONLY if direct expenditure to benefit C/OH	8		(a) Category (See Categories listed at the top of this schedule) (b) Description
9 Complete ONLY if direct expenditure to benefit C/OH Date 10/21/2024 Payee name Amazon Amount (\$) Payee address; City; State; Zip Code 410 Terry Ave. N Seattle , WA 98109 PURPOSE OF EXPENDITURE Candidate/Officeholder name Office sought Office held Office Overhead/Rental Expense Office held Office held Office held Office held Office Overhead/Rental Expense Office held Office held Office held Office held Office held Office Overhead/Rental Expense Office held			office overficacity territor
Date 10/21/2024 Amazon Amount (\$) Payee address; City; State; Zip Code 410 Terry Ave. N Seattle , WA 98109 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date Payee name Office sought Office held Payee name Office Sught Office held Payee name Office Sught Office held Date O7/22/2024 BEST BUY Amount (\$) Payee address; City; State; Zip Code (b) Description Clerk if austin, TX, officeholder living expense GIFT FOR COURT STAFF Complete ONLY if direct expenditure to benefit C/OH Date O7/22/2024 BEST BUY Amount (\$) Payee name Office sought Office held Date O7/22/2024 BEST BUY Amount (\$) Payee address; City; State; Zip Code 2480 HWY 6 S HOUSTON, TX 77077 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Police if Itavel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CAMPAIGN LAPTOP AND MICROSOFT SUBSCRIPTION Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
Date 10/21/2024 Amazon Amount (\$) Payee address; City; State; Zip Code 410 Terry Ave. N Seattle , WA 98109 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date Payee name Office sought Office held Payee name Office Sught Office held Payee name Office Sught Office held Date O7/22/2024 BEST BUY Amount (\$) Payee address; City; State; Zip Code (b) Description Clerk if austin, TX, officeholder living expense GIFT FOR COURT STAFF Complete ONLY if direct expenditure to benefit C/OH Date O7/22/2024 BEST BUY Amount (\$) Payee name Office sought Office held Date O7/22/2024 BEST BUY Amount (\$) Payee address; City; State; Zip Code 2480 HWY 6 S HOUSTON, TX 77077 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Police if Itavel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CAMPAIGN LAPTOP AND MICROSOFT SUBSCRIPTION Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
Date 10/21/2024 Amazon Amount (\$) Payee address; City; State; Zip Code 410 Terry Ave. N Seattle , WA 98109 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense Complete QNLY if direct expenditure to benefit C/OH Date 07/22/2024 Amount (\$) Payee name 07/22/2024 Amount (\$) Payee address; City; State; Zip Code 2480 HWY 6 S HOUSTON, TX 77077 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if Austin, TX, officebolder living expense GIFT FOR COURT STAFF Office held Date 07/22/2024 Date 07/22/2024 Amount (\$) Payee address; City; State; Zip Code 2480 HWY 6 S HOUSTON, TX 77077 PURPOSE OF Categories listed at the top of this schedule) Office Overhead/Rental Expense CAMPAIGN LAPSTOP AND MICROSOFT SUBSCRIPTION Complete QNLY if direct Campilete Sheld In Great Candidate/Officeholder name Office Sought Office held	9		
Amount (\$)		expenditure to benefit C/O	4
Amount (\$)		Date	Payee name
\$22.51 410 Terry Ave. N Seattle , WA 98109 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Gift/Awards/Memorials Expense Complete ONLY if direct expenditure to benefit C/OH Date 07/22/2024 Amount (\$) Payee name 07/22/2024 BEST BUY Amount (\$) Payee address; City; State; Zip Code \$1,050.00 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if austin, TX, officeholder living expense Check if ravel outside of Texas. Complete Schedule T. Check if austin, TX, officeholder iving expense CAMPAIGN LAPTOP AND MICROSOFT SUBSCRIPTION Office held		10/21/2024	Amazon
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense GIFT FOR COURT STAFF Complete ONLY if direct expenditure to benefit C/OH Date 07/22/2024 Amount (\$) Payee name BEST BUY Amount (\$) Payee address; City; State; Zip Code 2480 HWY 6 S HOUSTON, TX 77077 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Camplete ONLY if direct Candidate/Officeholder name Office sought Office Overhead/Rental Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office output Office held		Amount (\$)	Payee address; City; State; Zip Code
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description check if travel outside of Texas. Complete Schedule T.		\$22.51	410 Terry Ave. N
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description check if travel outside of Texas. Complete Schedule T.			
Complete ONLY if direct expenditure to benefit C/OH Date Payee name BEST BUY Amount (\$) Payee address; City; State; Zip Code \$1,050.00 2480 HWY 6 S HOUSTON, TX 77077 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Police is complete one of the complete one of the complete of the co			Seattle , WA 98109
Complete ONLY if direct expenditure to benefit C/OH Date Payee name BEST BUY Amount (\$) Payee address; City; State; Zip Code \$1,050.00 \$1,050.00 \$2480 HWY 6 S HOUSTON, TX 77077 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office Sought Office Overhead Complete ONLY if direct Candidate/Officeholder name Office sought Office sought Office Sought Office Held			
Complete ONLY if direct expenditure to benefit C/OH Date Payee name BEST BUY Amount (\$) Payee address; City; State; Zip Code \$1,050.00 \$2480 HWY 6 S HOUSTON, TX 77077 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Complete ONLY if direct Candidate/Officeholder name Office sought Office Sought Office held			Only Wards/Wellionals Expense
Date			
Date			
Date 07/22/2024 BEST BUY Amount (\$) Payee address; City; State; Zip Code \$1,050.00 \$1,050.00 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CAMPAIGN LAPTOP AND MICROSOFT SUBSCRIPTION Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
D7/22/2024 Amount (\$) Payee address; City; State; Zip Code \$1,050.00 PAUSTON, TX 77077 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CAMPAIGN LAPTOP AND MICROSOFT SUBSCRIPTION Complete ONLY if direct Candidate/Officeholder name Office sought Office held		expenditure to benefit C/O	1
Amount (\$) Payee address; City; State; Zip Code 2480 HWY 6 S HOUSTON, TX 77077 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense CAMPAIGN LAPTOP AND MICROSOFT SUBSCRIPTION Complete ONLY if direct Candidate/Officeholder name Office sought Office held		Date	Payee name
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HOUSTON, TX 77077 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense CAMPAIGN LAPTOP AND MICROSOFT SUBSCRIPTION Complete ONLY if direct Candidate/Officeholder name Candidate/Officeholder name Office sought Obscription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CAMPAIGN LAPTOP AND MICROSOFT SUBSCRIPTION Office held		Amount (\$)	Payee address; City; State; Zip Code
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CAMPAIGN LAPTOP AND MICROSOFT SUBSCRIPTION Complete ONLY if direct Candidate/Officeholder name Office sought Office held		\$1,050.00	2480 HWY 6 S
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense CAMPAIGN LAPTOP AND MICROSOFT SUBSCRIPTION Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
OF EXPENDITURE Office Overhead/Rental Expense Office Overhead/Rental Expense CAMPAIGN LAPTOP AND MICROSOFT SUBSCRIPTION Complete ONLY if direct Candidate/Officeholder name Office sought Office held			HOUSTON, TX 77077
EXPENDITURE Office Overnead/Rental Expense Check if Austin, TX, officeholder living expense CAMPAIGN LAPTOP AND MICROSOFT SUBSCRIPTION Complete ONLY if direct Candidate/Officeholder name Office sought Office held			l
CAMPAIGN LAPTOP AND MICROSOFT SUBSCRIPTION Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Office Overhead/Nertial Expense
Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OH			
		expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/17 Rpt: 21/35	Rogers, Dawn Deshea (The Honorable) 00084199
4	Date	5 Payee name
	12/06/2024	Brennan's
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$150.00	3300 Smith St
		Houston, TX 77006
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		CIVIL JUDICIAL DIVISION HOLIDAY DINNER
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	11/18/2024	DAVIS STREET AT HERMAN PARK RESTAURANT
	Amount (\$)	Payee address; City; State; Zip Code
	\$76.95	5925 ALMEDA RD.
	Ψ10.30	SSES NEMEDATOS.
		HOUSTON, TX 77004
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense CAMPAIGN DINNER
		CAIVII AIGIV DIIVIVEIX
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Power name
	12/06/2024	Payee name Direct TV
	Amount (\$)	Payee address; City; State; Zip Code
	\$115.36	2260 E. Imperial Hwy.
		El Segundo, CA 90245
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		COURT/CHAMBERS CABLE SUBSCRIPTION
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	onpolicitate to beliefit 0/01	•
L		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/17 Rpt: 22/35	Rogers, Dawn Deshea (The Honorable) 00084199
4	Date	5 Payee name
	08/09/2024	ECO PARK HOUSTON
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$40.00	16152 John F Kennedy Blvd
		HOUSTON, TX 77032
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	AIRPORT PARKING Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		AIRPORT PARKING
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/18/2024	FOGO DE CHOU
	Amount (\$)	Payee address; City; State; Zip Code
	\$46.60	19820 NORTHWEST FWY
	Ţ.0.00	
		HOUSTON, TX 77065
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		CAMPAIGN LUNCH
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/23/2024	FOOD BOX #12
	Amount (\$)	
	\$43.70	Payee address; City; State; Zip Code 17615 E US 290
	\$43.70	1/012 E O2 530
		ELGIN, TX 78621
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		GAS WHILE RETURNING HOME FROM FAMILY VIOLENCE CLE
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	CAPETIGITATE TO DETICITE C/OF	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid		Printing Salarie		se s/Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission Filers)
L	Sch: 5/17 Rpt: 23/35		Rogers, Da	wn Deshea (The I	Honorable)				00084199	
4	Date	5	Payee name								
	10/23/2024		FOOD BOX	X #12							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip (Code				
	\$10.00		17615 E US	S 290							
			ELGIN, TX	78621							
8	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	edule)	(b)	Description			
	OF EXPENDITURE			age Expense		,		_ ·	outsi	de of Texas. Com	plete Schedule T.
	EXI ENDITORE							ш		officeholder living	
								VIOLENCE C			G HOME FROM FAMIL
_	Complete ONLY if alice -t	Ļ	Condidate /Cff	achalder rama		office -	oue bt				ald.
9	Complete ONLY if direct expenditure to benefit C/O		Jandidate/Offi	ceholder name		office s	ought			Office he	eiu
	Date		Payee name			_					
	09/30/2024		Four Seaso	ns							
	Amount (\$)		Payee addre	ss; City;	State;	Zip (Code				
	\$35.53		98 San Jaci	into Blvd.							
			Austin, TX 7	78701							
	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	edule)	(b)	Description			
	OF EXPENDITURE			age Expense		-				de of Texas. Com	
								CAMPAIGN I		officeholder living	expense
								CAIVIPAIGN I	אווע	IIVER	
\vdash	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name		office s	ought			Office he	ald.
	expenditure to benefit C/Ol		Januiuale/OIII	condider Haille	O	ATTICE S	ougni			Office He	Ju
\vdash	Data	<u> </u>	Daves :								
	Date 07/25/2024		Payee name Four Seaso	ne							
						 ·	0- '				
	Amount (\$)		Payee addres		State;	∠ip (Code				
	\$1,657.29		300 S Dohe	eny Dr,							
			LOS ANGE	LES, CA 90048							
	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		JUDICAL C	LE						de of Texas. Com	
								—		officeholder living	expense L CIVIL DIVISION
								JUDICIAL CL		OI AININUA	L SIVIL DIVISION
	Complete ONLY if direct	Щ	Candidate/Offi	ceholder name		office s	Ought			Office he	hld
	expenditure to benefit C/O		Sandidato/OIII	co.loidoi lidillo	Ü		Sugin			Omoc ne	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (expense extenses and listed above)

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guid		Wages	s/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers))
	Sch: 6/17 Rpt: 24/35		wn Deshea (The I	Honorable)				00084199		
4	Date	5 Payee name								
	10/08/2024	HOTEL ZAZ	ZA							
6	Amount (\$)	7 Payee addres	ss; City;	State; Zip Co	ode					
	\$709.49	5701 MAIN	ST.							
		HOUSTON,	TX 77005							
8	PURPOSE	(a) Category (Se	ee Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE	Event Expe	nse					de of Texas. Com		
						—		officeholder living	SL ALUMNI BOARD	
						EVENT	ט ו	OKING IWIS	BL ALUIVIINI BOARD	
9	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	ıaht			Office he	ald.	
9	expenditure to benefit C/O		cendidei name	Office Suc	agrit			Office fie	au.	
_	Date	Payee name								_
	11/25/2024	HOUSTON	AN							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$21.00	111 N, POS	•	, ,						
	, , ,	,	-							
		HOUSTON,	TX 77024							
	PURPOSE OF	(a) Category (Se	ee Categories listed at the	top of this schedule)	(b)	Description				
	EXPENDITURE	Event Expe	nse			=		de of Texas. Comp		
						ш		officeholder living	CTAS DINNER	
						174441110 10	,,,	TILIND TAC	THO DINNER	
	Complete ONLY if direct		ceholder name	Office sou	<u>l</u> ught			Office he	eld	
	expenditure to benefit C/OI	.1								
	Date	Payee name								
	07/31/2024	Harris Cour	ty Democratic Pa	ırty						
	Amount (\$)	Payee addres	ss; City;	State; Zip Co	ode					
	\$10,000.00	4619 Lyons	Ave							
		Houston, T	< 77020							
	PURPOSE OF		ee Categories listed at the		(b)	Description				
	EXPENDITURE		s/Donations Mad					de of Texas. Com		
		Candidate/C	Officeholder/Polition	cai Committee		GOTV DONA		officeholder living	expense	
						JOIN DONA		J. 4		
	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	<u>l</u> uaht			Office he	eld	_
	expenditure to benefit C/O			255 000	9			200 110	· -	
l										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 7/17 Rpt: 25/35	Rogers, Dawn Deshea (The Honorable) 00084199
4	Date	5 Payee name
	07/31/2024	Hobby Lobby
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$181.32	26060 US 290
		Cypress, TX 77429
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	COURT DECOR Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		FRAMING/DECOR
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	12/19/2024	Homegoods
	Amount (\$)	Payee address; City; State; Zip Code
	\$60.39	770 Cochituate Rd
		Framington , MA 02144
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		HOLIDAY GIFTS FOR TEAM AND COLLEAGUES
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiditure to benefit C/Oi	1
	Date	Payee name
	12/02/2024	Homegoods
	Amount (\$)	Payee address; City; State; Zip Code
	\$32.46	770 Cochituate Rd
		Framington , MA 02144
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) OFFICE EQUIPMENT/DECOR (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		DECOR/SUPPLLIES FOR CHAMBERS
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee	Food/Beverage Expense Gift/Awards/Memorials Expu Legal Services The Instruction Guide	ense Prir Sal	Ü	nse es/Contract Labor	Travel in Dis Travel Out o OTHER (ent	
1	Total pages Schedule F1:						3 Filer ID	(Ethics Commission Filers)
L	Sch: 8/17 Rpt: 26/35	Rogers, [Dawn Deshea (The H	onorable)			0008419	9
4		5 Payee nan	me					
L	07/22/2024	Homegoo	ods					
6	Amount (\$)	7 Payee add	lress; City;	State; Zi	p Code			
	\$40.04	770 Coch	nituate Rd					
L		Framingto	on , MA 02144					
8	PURPOSE	(a) Category	(See Categories listed at the to	p of this schedule	_{e)} (b) Description		
	OF EXPENDITURE	COURT [DECOR/EQUIPMENT	-		=		Complete Schedule T.
						COURT DEC	n, TX, officeholder li	
						555 520		·· ···· · ·
9	Complete ONLY if direct	Candidate/0	Officeholder name	Office	e sough	<u> </u>	Office	e held
Ĺ	expenditure to benefit C/Oh							
	Date	Payee nan	ne					
	10/01/2024	Houston	Black American Demo	ocrats				
	Amount (\$)	Payee add	lress; City;	State; Zi	p Code			
	\$250.00	4806 Edf	ield St					
		Houston,	TX 77033					
	PURPOSE	(a) Category	(See Categories listed at the to	p of this schedule	e) (b) Description		
	OF EXPENDITURE	Contribut	ions/Donations Made	Ву		ш		Complete Schedule T.
	EXI ENDITORE	Candidat	e/Officeholder/Politica	al Committee	e	_	n, TX, officeholder li	iving expense
						GOTV CONT	I KIDU I IUN	
\vdash	Complete ONLY if direct	Candidate/C	Officeholder name	Office	e sough	<u> </u>	Office	held
	expenditure to benefit C/O		sonoidor naino	Onice	o oougii	•	Onice	,
_	Date	Dayoo non	ma					
	12/23/2024	Payee nan KISS Hou						
	Amount (\$)	Payee add		State; Zi	in Codo			
	\$663.05		vards St #100	Siale, ZI	h cone			
	φυυ3.05	ZOIO EUV	vaius St #100					
		Houston,	TX 77007					
	PURPOSE	(a) Category	(See Categories listed at the to	p of this schedule	e) (b) Description		
	OF EXPENDITURE	Food/Bev	verage Expense			ш		Complete Schedule T.
						COURT CHF	n, TX, officeholder li	
						SOURT OH	TO LIVING DII	*: *L: \
	Complete ONLY if direct	Candidate/0	Officeholder name	Office	e sough	<u> </u>	Office	e held
	expenditure to benefit C/Oh			300	- 554911	-	S.1100	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memori Legal Services The Instruction	·		ages/Cor	ntract Labor		el Out of Dis ER (enter a	strict category not listed abov	/e)
1	Total pages Schedule F1:	2 FII FD		•		-	I	3 File	r ID	(Ethics Commissio	n Filers)
	Sch: 9/17 Rpt: 27/35		rs, Dawn Deshea (T	he Honorable	e)				84199	(2000)	
4	Date	5 Payee	name								
	10/30/2024	LAZ P	ARKING								
6	Amount (\$) \$25.00	301 H	address; City; AMILTON ST. STON, TX 77002	State	; Zip Co	de					
8	PURPOSE	(a) Catego	Ory (See Categories listed	at the ton of this sch	nedule)	(b) De	escription				
	OF	1	Expense	at the top of this SCI	icaui c)			outside of	Texas. Com	plete Schedule T.	
	EXPENDITURE					P/	Check if Austin,	, TX, office	holder living		
9	Complete ONLY if direct expenditure to benefit C/O		te/Officeholder name	(Office sou	ght		_	Office he	eld	
	Date	Payee	name								
	09/12/2024	MEYE	RLAND AREA DEI	MOCRATS C	LUB						
	Amount (\$)	Payee	address; City;	State	; Zip Co	de					
	\$250.00	4738	Beechnut								
	D. 177 - 2 - 2		STON, TX 77096			a :					
	PURPOSE OF		Ory (See Categories listed		nedule)	(b) De	escription	outoido of	Taylaa Cam	nlata Cabadula T	
	EXPENDITURE		butions/Donations I date/Officeholder/P		nittee	L G	Check if travel of Check if Austin, OTV CONT	, TX, office	holder living	plete Schedule T. I expense	
L											
	Complete ONLY if direct expenditure to benefit C/O		te/Officeholder name	(Office sou	ght			Office he	eld	
	Date	Payee	name								
	11/07/2024	NOTH	IING BUT BUNT CA	AKES							
	Amount (\$)	Payee	address; City;	State	; Zip Co	de					
	\$43.47	9822	FRY RD								
		CYPR	ESS, TX 77433								
	PURPOSE OF		Ory (See Categories listed	at the top of this sch	nedule)	(b) De	escription				
	EXPENDITURE	Food/	Beverage Expense				l			plete Schedule T.	
						L RI	Check if Austin,			JRT STAFF	
						ום		., u.L. I	511 001	J. (1 J./ (1)	
	Complete ONLY if direct		te/Officeholder name	(Office sou	ght			Office he	eld	
	expenditure to benefit C/O	п									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/17 Rpt: 28/35	Rogers, Dawn Deshea (The Honorable) 00084199
4	Date	5 Payee name
	11/07/2024	PAPASITOS CANTINA
6	Amount (\$)	7 Payee address; City; State; Zip Code
U	\$398.96	2515 S. Loop
		HOUSTON, TX 77054
8	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense LUNCH FOR COURT STAFF
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/22/2024	PARTY CITY
	Amount (\$)	Payee address; City; State; Zip Code
	\$42.12	6757 HWY 6
	·	
		HOUSTON, TX 77084
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense BALLOONS FOR FUNDRAISER
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/29/2024	POSTAL PLUS ONE
	Amount (\$) \$144.00	Payee address; City; State; Zip Code 6037 N. Fry Rd.
		Katy, TX 77449
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ANNUAL PO BOX RENTAL
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/17 Rpt: 29/35	Rogers, Dawn Deshea (The Honorable) 00084199
4	Date	5 Payee name
	11/05/2024	POSTAL PLUS ONE
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$45.00	6037 N. Fry Rd.
		Katy, TX 77449
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	POSTAGE Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense POSTAGE FOR THANK YOU NOTES
		POSTAGE FOR THANK TOU NOTES
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to serious eye.	
	Date	Payee name
	08/27/2024	POSTAL PLUS ONE
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.30	6037 N. Fry Rd.
		Katy, TX 77449
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	POSTAGE Check if travel outside of Texas. Complete Schedule T.
	ZA ZIIDII GRZ	Check if Austin, TX, officeholder living expense
		POSTAGE FOR THANK YOU NOTES
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experience to benefit of or	<u>'</u>
	Date	Payee name
	07/18/2024	PayPal
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.39	2211 North First Street
		San Jose, CA 95131
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		PAYPAL FEES
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services			/ages	/Contract Labor		OTHER (enter a	strict a category not listed abo	ove)
				The Instruction G	uide explains	how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME	Ξ					3	Filer ID	(Ethics Commissi	on Filers)
l	Sch: 12/17 Rpt: 30/35		Rogers, Da	wn Deshea (Th	e Honorable	∋)				00084199		
4	Date	5	Payee name									
	07/18/2024		PayPal									
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	de					
	\$9.22	ľ	•	First Street	O tato	,p 00						
l	Ψ0.22		ZZII Worth	T ii St Oti CCt								
l												
L			San Jose, (CA 95131								
8	PURPOSE	(a)	Category (S	ee Categories listed at	the top of this sch	iedule)	(b)	Description				
	OF EXPENDITURE		Accounting	/Banking							nplete Schedule T.	
								_		officeholder livin	g expense	
								PAYPAL FEE	-5			
L												
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	(Office sou	ght			Office h	eld	
	experiulture to beriefit C/Of											
Г	Date		Payee name									
	07/20/2024		PayPal									
H	Amount (\$)	H	Payee addre	ss; City;	State:	; Zip Co	de					
l	\$14.94		2211 North	First Street								
			Can lace (CA 0E121								
L		L	San Jose, (
	PURPOSE OF	(a)		ee Categories listed at	the top of this sch	iedule)	(b)	Description		d4.T O	-ulata Cabadula T	
l	EXPENDITURE		Accounting	/Banking				=		of rexas. Con officeholder livin	nplete Schedule T.	
								PAYPAL FEE			9	
⊢	Complete ONLY if direct	<u> </u>	^andidate/Off	ceholder name		Office sou	aht			Office h	eld	
l	expenditure to benefit C/OI		Sandidate/On	ceriolaei mame		Jilice 30u	giit			Office fi	Ciu	
⊨		_										
	Date		Payee name									
	09/10/2024		PayPal									
l	Amount (\$)		Payee addre	ss; City;	State:	; Zip Co	de					
l	\$15.38		2211 North	First Street								
l			San Jose, 0	CA 95131								
H	PURPOSE	(a)	Category	ee Categories listed at	Al A Al- : I-		(b)	Description				
l	OF	(~)	Accounting		trie top of triis scri	ledule)	(~)		outsi	de of Texas. Con	nplete Schedule T.	
l	EXPENDITURE		/ (CCCurring	Danking				Check if Austin	, TX,	officeholder livin	g expense	
								PAYPAL FEE	ES			
Г	Complete ONLY if direct		Candidate/Off	iceholder name	(Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
\vdash												
ı												

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contra The Instruction Guide explains how to complete thi		OTHER (enter a	category not listed above)
<u> </u>	T	- -			(Ethio O
1	Total pages Schedule F1:		3		(Ethics Commission Filers)
L	Sch: 13/17 Rpt: 31/35	Rogers, Dawn Deshea (The Honorable)		00084199	
4	Date	5 Payee name			
	09/28/2024	PayPal			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
l	\$29.39	2211 North First Street			
l					
l		San Jose, CA 95131			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Desc	cription		
l	OF EXPENDITURE		Check if travel out	tside of Texas. Com	plete Schedule T.
l	EXPENDITORE			X, officeholder living	expense
l		PAY	YPAL FEES	j .	
L					
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought		Office he	eld
L		·			
l	Date	Payee name			
l	09/30/2024	PayPal			
	Amount (\$)	Payee address; City; State; Zip Code			
l	\$72.74	2211 North First Street			
l					
l		San Jose, CA 95131			
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Desc	cription		
l	OF EXPENDITURE	· · · · · · · · · · · · · · · · · · ·		tside of Texas. Com	plete Schedule T.
l	EXI ENDITORE			X, officeholder living	expense
l		PAY	YPAL FEES	•	
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	old.
l	Complete ONLY if direct expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·		Office he	eiu
⊨					
l	Date	Payee name			
L	10/15/2024	ROYAL SONESTA			
l	Amount (\$)	Payee address; City; State; Zip Code			
l	\$10.00	2222 WEST LOOP SOUTH			
l					
		HOUSTON, TX 77027			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
l	OF EXPENDITURE	Event Expense		tside of Texas. Com	
l				X, officeholder living	
		174			
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	eld .
	expenditure to benefit C/OI			500 110	
-					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Openations Mad Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		District er a category not listed above)
1	Total pages Schedule F1:		(Ethics Commission Filers)
_	Sch: 14/17 Rpt: 32/35	Rogers, Dawn Deshea (The Honorable) 0008419	,
4	Date	5 Payee name	
	09/24/2024	RallyPay	
6	Amount (\$) \$570.35	7 Payee address; City; State; Zip Code 995 Market Street, 2nd Floor	
		San Francisco, CA 94105	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. C	
		Check if Austin, TX, officeholder li CHARGEBACKS TO RAL	
		TRANSACTIONS	ETPAT FOR PAILED
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office	held
	experiulture to beliefit C/Oi		
	Date	Payee name	
	10/08/2024	SCOTT, LASHELLE	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$50.00	3600 W. SAM HOUSTON PKWAY	
		HOUSTON, TX 77042	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By	complete Cahadula T
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	
		GOTV CONTRIBUTION	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office	held
	Date	Payee name	
	10/23/2024	SHERATON AUSTIN	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$303.92	1101 WOODLAWN AVE	
		GEORGETOWN, TX 78628	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	tomorphis Colombials T
	EXPENDITURE	HOTEL Check if travel outside of Texas. C	•
		ACCOMODATIONS WHI	• •
		VIOLENCE CLE	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office	held
	expenditure to benefit C/OI		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/17 Rpt: 33/35	Rogers, Dawn Deshea (The Honorable) 00084199
4	Date	5 Payee name
	11/25/2024	Sams Club
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$118.89	10488 Katy Frwy
		Houston, TX 77043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		JURY SNACKS
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/15/2024	Southwest Airlines
	Amount (\$)	Payee address; City; State; Zip Code
	\$357.96	2702 Love Field Dr
	φ357.90	2702 Love Field Di
		Dallas, TX 75235
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	FLIGHT TO ANNUAL JUDICAL Check if travel outside of Texas. Complete Schedule T.
		CLE/RETREAT Check if Austin, TX, officeholder living expense DT FLICHT TO ANNUAL TUDICAL CLE/RETREAT
		RT FLIGHT TO ANNUAL JUDICAL CLE/RETREAT
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experience to benefit eyer	
	Date	Payee name
	08/18/2024	Southwest Democrats
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	P.O. Box 2053
		Bellaire, TX 77402
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		GOTV CONTRIBUTION
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expense Legal Services The Instruction Guide explair		/ages/	es/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	<u></u>			·	3 Filer ID (Ethics Commission Filers)
1	Sch: 16/17 Rpt: 34/35		Rogers, Dawn Deshea (The Honoral	ble)		00084199
4	Date 10/04/2024	5	Payee name TEXAS ETHICS COMMISSION			
6	Amount (\$) \$500.00	7	Payee address; City; Sta SAM HOUSTON BLDG 201 EAST 14TH ST., 10TH FLOOR AUSTIN, TX 78701	ate; Zip Cod	de	
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this : LATE FILING FEE	schedule)		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense LATE FILING FEE
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Officeholder name	Office sou	ght	t Office held
	Date	Г	Payee name	, 		
	08/08/2024		THE NEW STAND			
	Amount (\$)	T	Payee address; City; Sta	ate; Zip Co	de	
	\$7.29		1 WORLD WAY			
	!					
		L	LOS ANGELES, CA 90045			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Food/Beverage Expense			Check if Austin, TX, officeholder living expense SNACK AT AIRPORT RETURNING FROM ANNUAL JUDICIAL CLE
	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Officeholder name	Office sou	ght	t Office held
Г	Date	Π	Payee name			
	09/17/2024		Texas Association of District Judges	;		
	Amount (\$) \$51.06		Payee address; City; Sta PO Box 1748	ate; Zip Co	de	
		L	Austin, TX 78767			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Con	nmittee		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ANNUAL MEMBERSHIP
	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Officeholder name	Office sou	ght	t Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/17 Rpt: 35/35	Rogers, Dawn Deshea (The Honorable) 00084199
4	Date	5 Payee name
	11/13/2024	Texas Center for the Judiciary
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$65.00	1210 San Antonio
		STE 800
		AUSTIN, TX 78701
8	PURPOSE	To.
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		UPDATED BENCH BOOK
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
_	Date	Daysa nama
	07/26/2024	Payee name Texas Center for the Judiciary
		•
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	1210 San Antonio
		Suite 800
		AUSTIN, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	CHILD WELFARE CLE Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		COST FOR CHILD WELFARE ONLINE CLE
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
H	Date	Payee name
	09/30/2024	Thurgood Marshall School of Law
		-
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,000.00	3100 Cleburne St
		Houston, TX 77004
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Candidate/Officeholder/Political Committee
		ALUMNI DONATION
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	1