

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

| | | | | |
|---|---|---|--|--|
| The JC/OH Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00081859 | 2 Total pages filed: 68 | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR The Honorable | FIRST Christine | MI MI | OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2025 |
| | NICKNAME | LAST Weems | SUFFIX | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; 1300 McGowen Street Houston, TX 77004 | | ZIP CODE | Date Hand-delivered or Date Postmarked |
| | | | | Receipt # Amount |
| | | | | Date Processed |
| | | | | Date Imaged |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR Ms. | FIRST Kasi | MI MI | |
| | NICKNAME | LAST Chadwick | SUFFIX | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); 2220 Westcreek Lane #1224 Houston, TX 77027 | | APT / SUITE #; | CITY; STATE; ZIP CODE |
| | | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE (713) | PHONE NUMBER 806-5460 | EXTENSION | |
| 8 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) | | | |
| 9 PERIOD COVERED | Month Day Year 10/27/2024 | THROUGH | Month Day Year 12/31/2024 | |
| 10 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 | |
| | | | | |
| 11 OFFICE | OFFICE HELD (if any) District Judge District 281 Harris | | 12 OFFICE SOUGHT (if known) Supreme Court Justice Place 4 | |

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 68

13 C / OH NAME Weems, Christine (The Honorable) **14 Filer ID** (Ethics Commission Filers)
00081859

15 NOTICE FROM POLITICAL COMMITTEE(S) This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

Additional Pages

| | |
|--|---|
| COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | COMMITTEE NAME |
| | COMMITTEE ADDRESS |
| | COMMITTEE CAMPAIGN TREASURER NAME |
| | COMMITTEE CAMPAIGN TREASURER ADDRESS |

| | | | |
|--------------------------------|--|----|-----------|
| 16 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 16,392.27 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 62,047.97 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 51,563.62 |
| OUTSTANDING LOAN TOTALS | 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 Christine Weems

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

| | |
|--|---|
| 18 FILER NAME Weems, Christine (The Honorable) | 19 Filer ID (Ethics Commission Filers) 00081859 |
|--|---|

| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | SUBTOTAL AMOUNT |
|---|-----------------|
| 1. <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) | \$ 16,392.27 |
| 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 | \$ 62,047.97 |
| 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

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 1/40 Rpt: 4/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/04/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Roberta | 7 Amount of Contribution (\$) \$19.00 |
| | 6 Contributor address; City; State; Zip Code Olympia, WA 98508 | |
| 8 Contributor's Principal Occupation Not Employed | | 9 Contributor's Job Title Not Employed |
| 10 Contributor's employer/law firm Not Employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Porter W. Jr. | Amount of Contribution (\$) \$10.12 |
| | Contributor address; City; State; Zip Code Miami, FL 33129 | |
| Contributor's Principal Occupation Retired | | 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) | | |
| Date 11/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baardsen, Carol | Amount of Contribution (\$) \$15.00 |
| | Contributor address; City; State; Zip Code Berkeley, CA 94710 | |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not 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

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|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 2/40 Rpt: 5/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/04/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baptist, Jeremy | 7 Amount of Contribution (\$) \$1.00 |
| | 6 Contributor address; City; State; Zip Code Overland Park, KS 66207 | |
| 8 Contributor's Principal Occupation Not Employed | | 9 Contributor's Job Title Not Employed |
| 10 Contributor's employer/law firm Not Employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanchett, Michael | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78209 | |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not Employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blick, Suzanne | Amount of Contribution (\$) \$15.00 |
| | Contributor address; City; State; Zip Code Sioux Falls, SD 57104 | |
| Contributor's Principal Occupation Truck Driver | | Contributor's Job Title Truck Driver |
| 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

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 3/40 Rpt: 6/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/31/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brameus, C. Henrik <hr/> 6 Contributor address; City; State; Zip Code Bow, WA 98232 | 7 Amount of Contribution (\$) \$1.00 |
| 8 Contributor's Principal Occupation Architect | | 9 Contributor's Job Title Solution Architect |
| 10 Contributor's employer/law firm Salesforce | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brameus, C. Henrik <hr/> Contributor address; City; State; Zip Code Bow, WA 98232 | Amount of Contribution (\$) \$1.00 |
| Contributor's Principal Occupation Architect | | Contributor's Job Title Solution Architect |
| Contributor's employer/law firm Salesforce | | Law firm of contributor's spouse (if any) |
| 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#: _____) Britton, Mary <hr/> Contributor address; City; State; Zip Code Chicago, IL 60625 | Amount of Contribution (\$) \$5.55 |
| Contributor's Principal Occupation Standardized Patient | | Contributor's Job Title Standardized Patient |
| Contributor's employer/law firm University of Illinois | | 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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 4/40 Rpt: 7/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/31/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byrd, Jason | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code Charlotte, NC 28226 | |
| 8 Contributor's Principal Occupation Administration | | 9 Contributor's Job Title Administration |
| 10 Contributor's employer/law firm Atrium Health | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 12/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cao, Christine | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78751 | |
| Contributor's Principal Occupation Veterinary | | Contributor's Job Title Veterinary |
| Contributor's employer/law firm Austin Vet Hospital | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carmichael, Philip | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Nyack, NY 10960 | |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not 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

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|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 5/40 Rpt: 8/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/27/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrell, Heidi | 7 Amount of Contribution (\$) \$11.11 |
| 6 Contributor address; City; State; Zip Code Medford, MA 02155 | | |
| 8 Contributor's Principal Occupation Research | | 9 Contributor's Job Title Research Development |
| 10 Contributor's employer/law firm Tufts University School of Engineering | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carren, Rachel | Amount of Contribution (\$) \$21.11 |
| Contributor address; City; State; Zip Code Chevy Chase, MD 20815 | | |
| Contributor's Principal Occupation Arts | | Contributor's Job Title Arts |
| 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 10/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrigan, Mark | Amount of Contribution (\$) \$1,000.00 |
| Contributor address; City; State; Zip Code Houston, TX 77027 | | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Carrigan Law Group, P.C. | | 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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 6/40 Rpt: 9/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/15/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cass, Judith | 7 Amount of Contribution (\$) \$6.00 |
| 6 Contributor address; City; State; Zip Code Frisco, TX 75034 | | |
| 8 Contributor's Principal Occupation Not Employed | | 9 Contributor's Job Title Not Employed |
| 10 Contributor's employer/law firm Not Employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 12/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cass, Judith | Amount of Contribution (\$) \$6.00 |
| Contributor address; City; State; Zip Code Frisco, TX 75034 | | |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not Employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Stephen | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code Allen, TX 75002 | | |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not 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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 7/40 Rpt: 10/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/26/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coulson, Sarah | 7 Amount of Contribution (\$) \$3.12 |
| | 6 Contributor address; City; State; Zip Code Chicago, IL 60626 | |
| 8 Contributor's Principal Occupation Actuary | | 9 Contributor's Job Title Actuary |
| 10 Contributor's employer/law firm BCBSIL | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Marshall | Amount of Contribution (\$) \$2.50 |
| | Contributor address; City; State; Zip Code Hot Springs, NC 28743 | |
| Contributor's Principal Occupation Merchant | | Contributor's Job Title Merchant |
| Contributor's employer/law firm Earth Guild | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daggett, Melissa | Amount of Contribution (\$) \$15.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77062 | |
| Contributor's Principal Occupation Education | | Contributor's Job Title Instructor |
| Contributor's employer/law firm San Jacinto College | | 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

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|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 8/40 Rpt: 11/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/30/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daggett, Melissa | 7 Amount of Contribution (\$) \$15.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77062 | |
| 8 Contributor's Principal Occupation Education | | 9 Contributor's Job Title Instructor |
| 10 Contributor's employer/law firm San Jacinto College | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Emeline | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Los Angeles, CA 90068 | |
| Contributor's Principal Occupation Retired | | 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) | | |
| Date 11/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Emeline | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Los Angeles, CA 90068 | |
| Contributor's Principal Occupation Retired | | 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

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 9/40 Rpt: 12/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/28/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeConde, Lauren | 7 Amount of Contribution (\$) \$22.22 |
| | 6 Contributor address; City; State; Zip Code Kapolei, HI 96707 | |
| 8 Contributor's Principal Occupation Not Employed | | 9 Contributor's Job Title Not Employed |
| 10 Contributor's employer/law firm Not Employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeRosse, Jenny | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Valley Village, CA 91607 | |
| Contributor's Principal Occupation Speaker Advisor | | Contributor's Job Title Speaker Advisor |
| Contributor's employer/law firm ImpactEleven | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Depeyrot, Thierry | Amount of Contribution (\$) \$3.12 |
| | Contributor address; City; State; Zip Code Menlo Park, CA 94025 | |
| Contributor's Principal Occupation Consultant | | Contributor's Job Title Consultant |
| Contributor's employer/law firm Bain & Company | | 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

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 10/40 Rpt: 13/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/03/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eason, Patty | 7 Amount of Contribution (\$) \$20.00 |
| | 6 Contributor address; City; State; Zip Code Georgetown, TX 78626 | |
| 8 Contributor's Principal Occupation Not Employed | | 9 Contributor's Job Title Not Employed |
| 10 Contributor's employer/law firm Not Employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edmunds, Adam | Amount of Contribution (\$) \$2.22 |
| | Contributor address; City; State; Zip Code Drexel Hill, PA 19026 | |
| Contributor's Principal Occupation Psychological Counselor | | Contributor's Job Title Psychological Counselor |
| Contributor's employer/law firm Haverford College | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fackert, James | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Brighton, MI 48116 | |
| Contributor's Principal Occupation Engineer | | Contributor's Job Title Engineer |
| Contributor's employer/law firm CAE Inc. | | 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

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 11/40 Rpt: 14/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/30/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farley, John <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76116 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Contributor's Principal Occupation Not Employed | | 9 Contributor's Job Title Not Employed |
| 10 Contributor's employer/law firm Not Employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fay, Raymond <hr/> Contributor address; City; State; Zip Code Washington, DC 20016 | Amount of Contribution (\$) \$50.00 |
| Contributor's Principal Occupation Lawyer | | Contributor's Job Title Lawyer |
| Contributor's employer/law firm Fay Law Group, PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felper, Adam <hr/> Contributor address; City; State; Zip Code Worcester, MA 01606 | Amount of Contribution (\$) \$2.77 |
| Contributor's Principal Occupation Nonprofit | | Contributor's Job Title Coordinator |
| Contributor's employer/law firm CLA | | 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

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 12/40 Rpt: 15/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/23/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foltz, Amy | 7 Amount of Contribution (\$) \$50.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77084 | |
| 8 Contributor's Principal Occupation Technology | | 9 Contributor's Job Title IT Analyst |
| 10 Contributor's employer/law firm Chevron | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/17/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forgan, Glenn | Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78731 | |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not Employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garg, Kumar | Amount of Contribution (\$) \$11.11 |
| | Contributor address; City; State; Zip Code Washington, DC 20008 | |
| Contributor's Principal Occupation Managing Director | | Contributor's Job Title Managing Director |
| Contributor's employer/law firm Schmidt Futures | | 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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 13/40 Rpt: 16/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/29/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Genzel, Mariya <hr/> 6 Contributor address; City; State; Zip Code Mountain View, CA 94043 | 7 Amount of Contribution (\$) \$31.25 |
| 8 Contributor's Principal Occupation Not Employed | | 9 Contributor's Job Title Not Employed |
| 10 Contributor's employer/law firm Not Employed | | 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#: _____) Giradot, James <hr/> Contributor address; City; State; Zip Code Gregory, MI 48137 | Amount of Contribution (\$) \$2.77 |
| Contributor's Principal Occupation Manager | | Contributor's Job Title Manger |
| Contributor's employer/law firm Loveland Technologies | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/06/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grant, Jeff <hr/> Contributor address; City; State; Zip Code Burien, WA 98166 | Amount of Contribution (\$) \$20.00 |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not 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

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|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 14/40 Rpt: 17/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/27/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Judith <hr/> 6 Contributor address; City; State; Zip Code El Cerrito, CA 94530 | 7 Amount of Contribution (\$) \$10.12 |
| 8 Contributor's Principal Occupation Not Employed | | 9 Contributor's Job Title Not Employed |
| 10 Contributor's employer/law firm Not Employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamill, Samuel <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76179 | Amount of Contribution (\$) \$15.00 |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not Employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 12/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamill, Samuel <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76179 | Amount of Contribution (\$) \$15.00 |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not 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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 15/40 Rpt: 18/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/30/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Deidra | 7 Amount of Contribution (\$) \$50.00 |
| | 6 Contributor address; City; State; Zip Code Las Vegas, NV 89135 | |
| 8 Contributor's Principal Occupation Not Employed | | 9 Contributor's Job Title Not Employed |
| 10 Contributor's employer/law firm Not Employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hasbrouck, Ellen | Amount of Contribution (\$) \$10.12 |
| | Contributor address; City; State; Zip Code New York, NY 10001 | |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not Employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hecht, Peter | Amount of Contribution (\$) \$10.12 |
| | Contributor address; City; State; Zip Code Philadelphia, PA 19147 | |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not 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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 16/40 Rpt: 19/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/27/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hirtz, Frank 6 Contributor address; City; State; Zip Code Centreville, VA 20120 | 7 Amount of Contribution (\$) \$11.11 |
| 8 Contributor's Principal Occupation Technical Account Manager | | 9 Contributor's Job Title Technical Account Manager |
| 10 Contributor's employer/law firm Red Hat | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogan, Laura Contributor address; City; State; Zip Code Jackson Heights, NY 11372 | Amount of Contribution (\$) \$3.12 |
| Contributor's Principal Occupation Lawyer | | Contributor's Job Title Lawyer |
| Contributor's employer/law firm NY Unified Court System | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holland, Joshua Contributor address; City; State; Zip Code Kingston, NY 12401 | Amount of Contribution (\$) \$3.12 |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not 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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 17/40 Rpt: 20/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/27/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Honda, Diane | 7 Amount of Contribution (\$) \$25.00 |
| 6 Contributor address; City; State; Zip Code Brentwood, TN 37027 | | |
| 8 Contributor's Principal Occupation Not Employed | | 9 Contributor's Job Title Not Employed |
| 10 Contributor's employer/law firm Not Employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hong, Sharon | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code Madison, MS 39110 | | |
| Contributor's Principal Occupation Physician | | Contributor's Job Title Physician |
| 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 10/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Paul | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code Austin, TX 78717 | | |
| Contributor's Principal Occupation Business Development | | Contributor's Job Title Business Development Manager |
| Contributor's employer/law firm Lenovo | | 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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 18/40 Rpt: 21/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/29/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Peter | 7 Amount of Contribution (\$) \$5.00 |
| | 6 Contributor address; City; State; Zip Code Seattle, WA 98105 | |
| 8 Contributor's Principal Occupation Not Employed | | 9 Contributor's Job Title Not Employed |
| 10 Contributor's employer/law firm Not Employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kehlenbach, Katie | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Round Rock, TX 78665 | |
| Contributor's Principal Occupation Sales | | Contributor's Job Title Sales |
| 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 11/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kehlenbach, Katie | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Round Rock, TX 78665 | |
| Contributor's Principal Occupation Sales | | Contributor's Job Title Sales |
| 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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 19/40 Rpt: 22/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/30/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim, John | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77006 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm The Kim Law Firm | | 11 Law firm of contributor's spouse (if any) The Kim Law Firm |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kram, Linda | Amount of Contribution (\$) \$10.12 |
| | Contributor address; City; State; Zip Code Saint Louis, MO 63132 | |
| Contributor's Principal Occupation Educator | | Contributor's Job Title Educator |
| 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 11/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lauderman, David | Amount of Contribution (\$) \$5.00 |
| | Contributor address; City; State; Zip Code Round Rock, TX 78681 | |
| Contributor's Principal Occupation Scheduler | | Contributor's Job Title Scheduler |
| Contributor's employer/law firm Capital of Texas Telecommunications | | 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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 20/40 Rpt: 23/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/02/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauger, Joel | 7 Amount of Contribution (\$) \$6.00 |
| | 6 Contributor address; City; State; Zip Code Raleigh, NC 27604 | |
| 8 Contributor's Principal Occupation Health Information Technician | | 9 Contributor's Job Title Health Information Technician |
| 10 Contributor's employer/law firm NCSU CVM | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meltser, Michael | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77007 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Mize Meltser, PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Kay | Amount of Contribution (\$) \$20.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78240 | |
| Contributor's Principal Occupation Marketing Manager | | Contributor's Job Title MarketingManager |
| Contributor's employer/law firm Visionworks | | 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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 21/40 Rpt: 24/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/02/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milbauer, Marvin | 7 Amount of Contribution (\$) \$5.00 |
| | 6 Contributor address; City; State; Zip Code New York, NY 10010 | |
| 8 Contributor's Principal Occupation Not Employed | | 9 Contributor's Job Title Not Employed |
| 10 Contributor's employer/law firm Not Employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molberg, Kenneth | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75224 | |
| Contributor's Principal Occupation Justice | | Contributor's Job Title Justice |
| Contributor's employer/law firm State of Texas | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monroe Hanley, Beverly | Amount of Contribution (\$) \$15.00 |
| | Contributor address; City; State; Zip Code Williamsburg, VA 23185 | |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not 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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 22/40 Rpt: 25/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/06/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monroe-Porter, Karen | 7 Amount of Contribution (\$) \$25.00 |
| | 6 Contributor address; City; State; Zip Code Austin, TX 78731 | |
| 8 Contributor's Principal Occupation Director | | 9 Contributor's Job Title Director |
| 10 Contributor's employer/law firm Pearson | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosher, Keith | Amount of Contribution (\$) \$11.11 |
| | Contributor address; City; State; Zip Code Ypsilanti, MI 48197 | |
| Contributor's Principal Occupation Software Engineer | | Contributor's Job Title Software Engineer |
| Contributor's employer/law firm Pulumi | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myers, Catherine | Amount of Contribution (\$) \$10.12 |
| | Contributor address; City; State; Zip Code Linwood, NJ 08221 | |
| Contributor's Principal Occupation Physician | | Contributor's Job Title Physician |
| Contributor's employer/law firm University of Pennsylvania | | 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

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|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 23/40 Rpt: 26/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/30/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nair, Rashmi <hr/> 6 Contributor address; City; State; Zip Code Lexington, KY 40513 | 7 Amount of Contribution (\$) \$27.77 |
| 8 Contributor's Principal Occupation Physician | | 9 Contributor's Job Title Physician |
| 10 Contributor's employer/law firm University of Kentucky | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/28/2024 | Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00630707</u>) National Democratic Redistricting PAC <hr/> Contributor address; City; State; Zip Code Washington, DC 20005 | Amount of Contribution (\$) \$10,000.00 |
| Contributor's Principal Occupation | | 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 11/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, June <hr/> Contributor address; City; State; Zip Code New York, NY 10036 | Amount of Contribution (\$) \$11.11 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm HGT Law | | 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

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|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 24/40 Rpt: 27/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/03/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patey, Gretchen | 7 Amount of Contribution (\$) \$4.00 |
| | 6 Contributor address; City; State; Zip Code Madison, WI 53701 | |
| 8 Contributor's Principal Occupation Waitstaff | | 9 Contributor's Job Title Waitstaff |
| 10 Contributor's employer/law firm Monona Catering | | 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#: _____) Peters, Allen | Amount of Contribution (\$) \$3.00 |
| | Contributor address; City; State; Zip Code El Segundo, CA 90245 | |
| Contributor's Principal Occupation Doctor | | Contributor's Job Title Doctor |
| 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 11/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinkerton, Heidi | Amount of Contribution (\$) \$6.67 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78223 | |
| Contributor's Principal Occupation Speech Pathologist | | Contributor's Job Title Speech Pathologist |
| Contributor's employer/law firm Brighton Center | | 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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 25/40 Rpt: 28/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/01/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pokala, Hanumantha | 7 Amount of Contribution (\$) \$250.00 |
| | 6 Contributor address; City; State; Zip Code Oklahoma City, OK 73104 | |
| 8 Contributor's Principal Occupation Physician | | 9 Contributor's Job Title Physician |
| 10 Contributor's employer/law firm OUHSC | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Greig | Amount of Contribution (\$) \$5.00 |
| | Contributor address; City; State; Zip Code San Leon, TX 77539 | |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not Employed | | Law firm of contributor's spouse (if any) |
| 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#: _____) Quick, Holly | Amount of Contribution (\$) \$3.33 |
| | Contributor address; City; State; Zip Code Nashville, TN 37204 | |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not 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

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|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 26/40 Rpt: 29/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/03/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray, Linda C. | 7 Amount of Contribution (\$) \$50.00 |
| 6 Contributor address; City; State; Zip Code Washington, DC 20009 | | |
| 8 Contributor's Principal Occupation Attorney Advisor | | 9 Contributor's Job Title Attorney Advisor |
| 10 Contributor's employer/law firm Federal Communications Commission | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Real, Dorine | Amount of Contribution (\$) \$127.00 |
| Contributor address; City; State; Zip Code Westport, CA 95488 | | |
| Contributor's Principal Occupation Hotelier | | Contributor's Job Title Hotelier |
| 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 11/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Remy, Linda | Amount of Contribution (\$) \$12.50 |
| Contributor address; City; State; Zip Code Belvedere, CA 94920 | | |
| Contributor's Principal Occupation Research | | Contributor's Job Title Research |
| Contributor's employer/law firm UCSF | | 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

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|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 27/40 Rpt: 30/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/21/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rial, Monty <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75214 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation Investments | | 9 Contributor's Job Title Investments |
| 10 Contributor's employer/law firm TCJ Ventures | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivas, Jason <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666 | Amount of Contribution (\$) \$11.00 |
| Contributor's Principal Occupation Historian | | Contributor's Job Title Historic Preservation Specialist |
| Contributor's employer/law firm State of Texas | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 12/05/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivas, Jason <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666 | Amount of Contribution (\$) \$11.00 |
| Contributor's Principal Occupation Historian | | Contributor's Job Title Historic Preservation Specialist |
| Contributor's employer/law firm State of Texas | | 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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 28/40 Rpt: 31/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/24/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Michael | 7 Amount of Contribution (\$) \$3.12 |
| | 6 Contributor address; City; State; Zip Code Baltimore, MD 21218 | |
| 8 Contributor's Principal Occupation Systems Engineer | | 9 Contributor's Job Title Systems Engineer |
| 10 Contributor's employer/law firm AURA | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenbloom, Alvin | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Tarzana, CA 91356 | |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not Employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sathianathan, Praveen | Amount of Contribution (\$) \$24.00 |
| | Contributor address; City; State; Zip Code New York, NY 10035 | |
| Contributor's Principal Occupation Journalism | | Contributor's Job Title Freelance Journalist |
| 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

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|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 29/40 Rpt: 32/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/29/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scaramuzzi, Catherine <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78739 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Contributor's Principal Occupation Not Employed | | 9 Contributor's Job Title Not Employed |
| 10 Contributor's employer/law firm Not Employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scaramuzzi, Catherine <hr/> Contributor address; City; State; Zip Code Austin, TX 78739 | Amount of Contribution (\$) \$50.00 |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not Employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaefer, Harry <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20901 | Amount of Contribution (\$) \$1.00 |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not 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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 30/40 Rpt: 33/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/03/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwartz, Caryl | 7 Amount of Contribution (\$) \$10.12 |
| | 6 Contributor address; City; State; Zip Code Rancho Palos Verdes, CA 90275 | |
| 8 Contributor's Principal Occupation Not Employed | | 9 Contributor's Job Title Not Employed |
| 10 Contributor's employer/law firm Not Employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Setterholm, Kirsten | Amount of Contribution (\$) \$5.55 |
| | Contributor address; City; State; Zip Code Berkeley, CA 94703 | |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not Employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheedy, Jennifer | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77057 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm The Foley 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

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|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 31/40 Rpt: 34/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/30/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sicinski, Sammi <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77009 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Contributor's Principal Occupation Teacher | | 9 Contributor's Job Title Teacher |
| 10 Contributor's employer/law firm Houston ISD | | 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#: _____) Silverstein, Sandra <hr/> Contributor address; City; State; Zip Code San Diego, CA 92122 | Amount of Contribution (\$) \$25.00 |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not Employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silverstein, Sandra <hr/> Contributor address; City; State; Zip Code San Diego, CA 92122 | Amount of Contribution (\$) \$25.00 |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not 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

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|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 32/40 Rpt: 35/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/30/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Stephanie | 7 Amount of Contribution (\$) \$98.00 |
| | 6 Contributor address; City; State; Zip Code Lubbock, TX 79413 | |
| 8 Contributor's Principal Occupation Not Employed | | 9 Contributor's Job Title Not Employed |
| 10 Contributor's employer/law firm Not Employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, David | Amount of Contribution (\$) \$6.00 |
| | Contributor address; City; State; Zip Code Kyle, TX 78640 | |
| Contributor's Principal Occupation Researcher | | Contributor's Job Title Researcher |
| Contributor's employer/law firm Texas State University at San Marcos | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 12/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, David | Amount of Contribution (\$) \$6.00 |
| | Contributor address; City; State; Zip Code Kyle, TX 78640 | |
| Contributor's Principal Occupation Researcher | | Contributor's Job Title Researcher |
| Contributor's employer/law firm Texas State University at San Marcos | | 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

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|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 33/40 Rpt: 36/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/29/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Diana | 7 Amount of Contribution (\$) \$12.50 |
| | 6 Contributor address; City; State; Zip Code Austin, TX 78751 | |
| 8 Contributor's Principal Occupation Not Employed | | 9 Contributor's Job Title Not Employed |
| 10 Contributor's employer/law firm Not Employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Diana | Amount of Contribution (\$) \$12.50 |
| | Contributor address; City; State; Zip Code Austin, TX 78751 | |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not Employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Robert | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Bedford, TX 76021 | |
| Contributor's Principal Occupation Retired | | 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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 34/40 Rpt: 37/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 12/15/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tesch, David | 7 Amount of Contribution (\$) \$5.00 |
| | 6 Contributor address; City; State; Zip Code Richmond, TX 77407 | |
| 8 Contributor's Principal Occupation Service Desk Technician | | 9 Contributor's Job Title Service Desk Technician |
| 10 Contributor's employer/law firm TDECU | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/15/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tesch, David | Amount of Contribution (\$) \$5.00 |
| | Contributor address; City; State; Zip Code Richmond, TX 77407 | |
| Contributor's Principal Occupation Service Desk Technician | | Contributor's Job Title Service Desk Technician |
| Contributor's employer/law firm TDECU | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomason, Heidi | Amount of Contribution (\$) \$31.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78248 | |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not 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

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|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 35/40 Rpt: 38/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/30/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tresca, Ina <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78750 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Contributor's Principal Occupation Retired | | 9 Contributor's Job Title Retired |
| 10 Contributor's employer/law firm Retired | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaidya, Rajesh <hr/> Contributor address; City; State; Zip Code San Jose, CA 95131 | Amount of Contribution (\$) \$3.12 |
| Contributor's Principal Occupation None | | Contributor's Job Title None |
| Contributor's employer/law firm None | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/29/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaidya, Rajesh <hr/> Contributor address; City; State; Zip Code San Jose, CA 95131 | Amount of Contribution (\$) \$3.12 |
| Contributor's Principal Occupation None | | Contributor's Job Title None |
| Contributor's employer/law firm None | | 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

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|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 36/40 Rpt: 39/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/28/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wager, James <hr/> 6 Contributor address; City; State; Zip Code Philadelphia, PA 19147 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Contributor's Principal Occupation Psychologist | | 9 Contributor's Job Title Psychologist |
| 10 Contributor's employer/law firm SDP | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/31/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagman, Marcy <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912 | Amount of Contribution (\$) \$2.22 |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not Employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Linn <hr/> Contributor address; City; State; Zip Code New Meadows, ID 83654 | Amount of Contribution (\$) \$2.50 |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not 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

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|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 37/40 Rpt: 40/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/31/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walsh, Michael 6 Contributor address; City; State; Zip Code Kyle, TX 78640 | 7 Amount of Contribution (\$) \$10.00 |
| 8 Contributor's Principal Occupation Not Employed | | 9 Contributor's Job Title Not Employed |
| 10 Contributor's employer/law firm Not Employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weems, Mary Contributor address; City; State; Zip Code Simsbury, CT 06070 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation Retired | | 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) | | |
| Date 11/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Sara Contributor address; City; State; Zip Code San Luis Obispo, CA 93401 | Amount of Contribution (\$) \$2.50 |
| Contributor's Principal Occupation Bookkeeper | | Contributor's Job Title Bookkeeper |
| Contributor's employer/law firm Pacific Builders | | 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

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 38/40 Rpt: 41/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/03/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weymouth, Rae Ann <hr/> 6 Contributor address; City; State; Zip Code Ann Arbor, MI 48103 | 7 Amount of Contribution (\$) \$80.00 |
| 8 Contributor's Principal Occupation Not Employed | | 9 Contributor's Job Title Not Employed |
| 10 Contributor's employer/law firm Not Employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitesell, Summer <hr/> Contributor address; City; State; Zip Code Seattle, WA 98125 | Amount of Contribution (\$) \$5.00 |
| Contributor's Principal Occupation Office Assistant | | Contributor's Job Title Office Assistant |
| Contributor's employer/law firm Seattle Deposition Reporters | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woerner, Amanda <hr/> Contributor address; City; State; Zip Code Houston, TX 77096 | Amount of Contribution (\$) \$200.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Womack Trial Lawyers | | 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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 39/40 Rpt: 42/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/03/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Holly | 7 Amount of Contribution (\$) \$2.50 |
| | 6 Contributor address; City; State; Zip Code New York, NY 10003 | |
| 8 Contributor's Principal Occupation College Advisor | | 9 Contributor's Job Title College Advisor |
| 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 11/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, David | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Portland, OR 97212 | |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not Employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 12/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, David | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Portland, OR 97212 | |
| Contributor's Principal Occupation Not Employed | | Contributor's Job Title Not Employed |
| Contributor's employer/law firm Not 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

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 40/40 Rpt: 43/68 |
| 2 FILER NAME Weems, Christine (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/27/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) York, Aaron | 7 Amount of Contribution (\$) \$11.11 |
| | 6 Contributor address; City; State; Zip Code North Bennington, VT 05257 | |
| 8 Contributor's Principal Occupation Psychiatrist | | 9 Contributor's Job Title Psychiatrist |
| 10 Contributor's employer/law firm Department of Veteran Affairs | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|---|
| 1 Total pages Schedule F1: Sch: 1/25 Rpt: 44/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/02/2024 | 5 Payee name 290 Express | |
| 6 Amount (\$) \$51.58 | 7 Payee address; City; State; Zip Code 12305 Eintrage Drive Manor, TX 78653 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas to Austin for meetings |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/01/2024 | Payee name ActBlue | |
| Amount (\$) \$21.46 | Payee address; City; State; Zip Code P.O. Box 441146 Somerville, MA 02144 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation platform processing fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/28/2024 | Payee name A L Media | |
| Amount (\$) \$52,000.00 | Payee address; City; State; Zip Code 222 West Ontario Suite 600 Chicgo, IL 60654 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video marketing campaign |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 2/25 Rpt: 45/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
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|-----------------------------|--|
| 4 Date 11/23/2024 | 5 Payee name BJs - Arlington |
|-----------------------------|--|

| | |
|---------------------------------|--|
| 6 Amount (\$) \$54.70 | 7 Payee address; City; State; Zip Code 201 E. Interstate 20 Arlington, TX 76018 |
|---------------------------------|--|

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|---------------------------------|--|---|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch in Arlington for meetings |
|---------------------------------|--|---|

| | | | |
|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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| Date 12/05/2024 | Payee name Blackburn Photography |
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| Amount (\$) \$469.00 | Payee address; City; State; Zip Code 1260 Blalock Road Houston, TX 77055 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Judicial and staff portraits |
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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 Brennan's Houston |
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| Amount (\$) \$150.00 | Payee address; City; State; Zip Code 3300 Smith Str. Houston, TX 77006 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Judge's holiday dinner |
|-------------------------------|--|--|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | | |
|----------|--|---|---|----------|---|--|
| 1 | Total pages Schedule F1: Sch: 3/25 Rpt: 46/68 | 2 | FILER NAME Weems, Christine (The Honorable) | 3 | Filer ID (Ethics Commission Filers) 00081859 | |
| 4 | Date 11/03/2024 | 5 | Payee name Bucees - Giddings | | | |
| 6 | Amount (\$) \$92.57 | 7 | Payee address; City; State; Zip Code 2375 E. Austin St. Giddings, TX 78942 | | | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas and lunch for travel home from Austin | | | |
| 9 | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held | | | | |
| | Date 11/22/2024 | | Payee name Bucees - Madisonville | | | |
| | Amount (\$) \$49.64 | | Payee address; City; State; Zip Code 205 IH-45N Madisonville, TX 77864 | | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas on the way to Dallas | | | |
| | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held | | | | |
| | Date 11/24/2024 | | Payee name Bucees - Madisonville | | | |
| | Amount (\$) \$38.90 | | Payee address; City; State; Zip Code 205 IH-45N Madisonville, TX 77864 | | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas coming back from Arlington | | | |
| | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held | | | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 4/25 Rpt: 47/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
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| 4 Date 12/29/2024 | 5 Payee name Buccees - Madisonville |
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| 6 Amount (\$) \$67.36 | 7 Payee address; City; State; Zip Code 205 IH-45N Madisonville, TX 77864 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas from Dallas for dinner with volunteers |
|---------------------------------|---|--|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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|--------------------|---------------------------|
| Date 11/07/2024 | Payee name Chick Fil A |
|--------------------|---------------------------|

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|------------------------|---|
| Amount (\$) \$90.73 | Payee address; City; State; Zip Code 20608 Interstate 45 Spring, TX 77373 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast for jury |
|-------------------------------|--|--|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

| | |
|--------------------|---------------------------|
| Date 11/13/2024 | Payee name Chick Fil A |
|--------------------|---------------------------|

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|------------------------|---|
| Amount (\$) \$87.89 | Payee address; City; State; Zip Code 20608 Interstate 45 Spring, TX 77373 |
|------------------------|---|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast for jury |
|-------------------------------|--|--|

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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 5/25 Rpt: 48/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/20/2024 | 5 Payee name Chick Fil A | |
| 6 Amount (\$) \$86.68 | 7 Payee address; City; State; Zip Code 20608 Interstate 45 Spring, TX 77373 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast for jury |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/13/2024 | Payee name Chick Fil A | |
| Amount (\$) \$87.89 | Payee address; City; State; Zip Code 20608 Interstate 45 Spring, TX 77373 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast for jury |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/19/2024 | Payee name Chick Fil A | |
| Amount (\$) \$87.89 | Payee address; City; State; Zip Code 20608 Interstate 45 Spring, TX 77373 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast for Jury |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|----------|--|--|---|---------------|---|
| 1 | Total pages Schedule F1: Sch: 6/25 Rpt: 49/68 | 2 | FILER NAME Weems, Christine (The Honorable) | 3 | Filer ID (Ethics Commission Filers) 00081859 |
| 4 | Date 12/10/2024 | 5 | Payee name Constant Contact | | |
| 6 | Amount (\$) \$172.74 | 7 | Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451 | | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email marketing annual fee | | |
| 9 | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | Date 12/15/2024 | | Payee name Costco | | |
| | Amount (\$) \$64.93 | | Payee address; City; State; Zip Code 3836 Richmond Houston, TX 77027 | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Coffee for jury | | |
| | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | Date 11/04/2024 | | Payee name Democracy Engine | | |
| | Amount (\$) \$0.28 | | Payee address; City; State; Zip Code 2125 14th Street NW Washington, DC 20001 | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation platform processing 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.

| | | | | | |
|----------|--|---|--|---------------|---|
| 1 | Total pages Schedule F1: Sch: 7/25 Rpt: 50/68 | 2 | FILER NAME Weems, Christine (The Honorable) | 3 | Filer ID (Ethics Commission Filers) 00081859 |
| 4 | Date 11/05/2024 | 5 | Payee name East End Hardware | | |
| 6 | Amount (\$) \$350.00 | 7 | Payee address; City; State; Zip Code 3005 Leeland Street Houston, TX 77003 | | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Election Night Party | | |
| 9 | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | Date 12/15/2024 | | Payee name El Tiempo Cantina | | |
| | Amount (\$) \$600.00 | | Payee address; City; State; Zip Code 2814 Navigation Blvd. Houston, TX 77003 | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday gift cards for staff | | |
| | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | Date 11/04/2024 | | Payee name Google G Suite | | |
| | Amount (\$) \$7.68 | | Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043 | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign email account | | |
| | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 8/25 Rpt: 51/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 12/02/2024 | 5 Payee name Google G Suite | |
| 6 Amount (\$) \$7.68 | 7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign email address |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/19/2024 | Payee name HEB | |
| Amount (\$) \$37.98 | Payee address; City; State; Zip Code 2121 FM 2920 Spring, TX 77388 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Coffee for jury |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/22/2024 | Payee name HEB | |
| Amount (\$) \$53.68 | Payee address; City; State; Zip Code 2121 FM 2920 Spring, TX 77388 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Decorations for holiday dinner |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: Sch: 9/25 Rpt: 52/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/22/2024 | 5 Payee name Hainley, Lauren | |
| 6 Amount (\$) \$1,160.00 | 7 Payee address; City; State; Zip Code 6147 Gehring Str. Houston, TX 77021 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract campaign work |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/03/2024 | Payee name Hampton Inn | |
| Amount (\$) \$43.30 | Payee address; City; State; Zip Code 1701 Lavaca St Austin, TX 78701 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Overnight parking at hotel in Austin |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/13/2024 | Payee name Hermes of Paris | |
| Amount (\$) \$23.45 | Payee address; City; State; Zip Code 4444 Westheimer Road, Suite B1000 Houston, TX 77027 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gifts for outgoing judges |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 10/25 Rpt: 53/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
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|-----------------------------|---|
| 4 Date 12/29/2024 | 5 Payee name Hilton Hotel Anatole |
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| 6 Amount (\$) \$23.56 | 7 Payee address; City; State; Zip Code 2201 North Stemmons Freeway Dallas, TX 75207 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (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 parking |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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|--------------------|--------------------------|
| Date 11/02/2024 | Payee name Hotels.com |
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|-------------------------|---|
| Amount (\$) \$224.64 | Payee address; City; State; Zip Code 5400 LBJ Freeway Suite 500 Dallas, TX 75240 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (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 in Austin for meetings |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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|--------------------|--------------------------|
| Date 11/22/2024 | Payee name Hotels.com |
|--------------------|--------------------------|

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|-------------------------|---|
| Amount (\$) \$322.56 | Payee address; City; State; Zip Code 5400 LBJ Freeway Suite 500 Dallas, TX 75240 |
|-------------------------|---|

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|------------------------|--|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (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 in Arlington for thank you lunch |
|------------------------|--|---|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 11/25 Rpt: 54/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
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|-----------------------------|-----------------------------------|
| 4 Date 12/28/2024 | 5 Payee name Hotels.com |
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|----------------------------------|--|
| 6 Amount (\$) \$237.72 | 7 Payee address; City; State; Zip Code 5400 LBJ Freeway Suite 500 Dallas, TX 75240 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (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 for Dallas dinner with volunteers |
|---------------------------------|---|---|

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|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|------------------------------------|
| Date 12/22/2024 | Payee name Houston Center Valet |
|--------------------|------------------------------------|

| | |
|------------------------|--|
| Amount (\$) \$18.00 | Payee address; City; State; Zip Code 1200 McKinney Houston, TX 77010 |
|------------------------|--|

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|-------------------------------|--|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Valet parking for court holiday dinner |
|-------------------------------|--|--|

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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

| | |
|--------------------|-------------------------------|
| Date 11/08/2024 | Payee name Kolache Factory |
|--------------------|-------------------------------|

| | |
|-------------------------|--|
| Amount (\$) \$116.06 | Payee address; City; State; Zip Code 5941-A FM 2920 Spring, TX 77388 |
|-------------------------|--|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast for jury |
|-------------------------------|--|--|

| | | | |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 12/25 Rpt: 55/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
|--|---|--|

| | |
|-----------------------------|--|
| 4 Date 12/18/2024 | 5 Payee name Kolache Factory |
|-----------------------------|--|

| | |
|----------------------------------|---|
| 6 Amount (\$) \$117.82 | 7 Payee address; City; State; Zip Code 5941-A FM 2920 Spring, TX 77388 |
|----------------------------------|---|

| | | |
|---------------------------------|--|--|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast for jury |
|---------------------------------|--|--|

| | | | |
|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|------------------------------|
| Date 11/12/2024 | Payee name La Calle Tacos |
|--------------------|------------------------------|

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|------------------------|--|
| Amount (\$) \$61.57 | Payee address; City; State; Zip Code 909 Franklin Street Houston, TX 77002 |
|------------------------|--|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch for clerks |
|------------------------|--|--|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

| | |
|--------------------|--------------------------|
| Date 12/17/2024 | Payee name Laurenzo's |
|--------------------|--------------------------|

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|-------------------------|--|
| Amount (\$) \$350.00 | Payee address; City; State; Zip Code 4412 Washington Ave Houston, TX 77007 |
|-------------------------|--|

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|------------------------|--|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday event for campaign volunteers |
|------------------------|--|---|

| | | | |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 13/25 Rpt: 56/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
|--|---|--|

| | |
|-----------------------------|-------------------------------|
| 4 Date 10/31/2024 | 5 Payee name Luby's |
|-----------------------------|-------------------------------|

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|---------------------------------|---|
| 6 Amount (\$) \$30.94 | 7 Payee address; City; State; Zip Code 201 Caroline Street Houston, TX 77002 |
|---------------------------------|---|

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|---------------------------------|--|---|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Clerk lunch |
|---------------------------------|--|---|

| | | | |
|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|--------------------|
| Date 11/21/2024 | Payee name Lyft |
|--------------------|--------------------|

| | |
|-----------------------|---|
| Amount (\$) \$7.22 | Payee address; City; State; Zip Code 2855 Mangum Road Suite B106 Houston, TX 77092 |
|-----------------------|---|

| | | |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Car ride from courthouse to coach intro lunch |
|-------------------------------|---|---|

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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

| | |
|--------------------|--------------------|
| Date 12/04/2024 | Payee name Lyft |
|--------------------|--------------------|

| | |
|-----------------------|---|
| Amount (\$) \$8.82 | Payee address; City; State; Zip Code 2855 Mangum Road Suite B106 Houston, TX 77092 |
|-----------------------|---|

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|-------------------------------|---|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ride from courthouse to Susman event |
|-------------------------------|---|--|

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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 14/25 Rpt: 57/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
|--|---|--|

| | |
|-----------------------------|-----------------------------|
| 4 Date 12/04/2024 | 5 Payee name Lyft |
|-----------------------------|-----------------------------|

| | |
|--------------------------------|--|
| 6 Amount (\$) \$4.60 | 7 Payee address; City; State; Zip Code 2855 Mangum Road Suite B106 Houston, TX 77092 |
|--------------------------------|--|

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ride from Susman to Abraham Watkins event |
|---------------------------------|---|---|

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|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|--------------------|
| Date 12/05/2024 | Payee name Lyft |
|--------------------|--------------------|

| | |
|-----------------------|---|
| Amount (\$) \$8.47 | Payee address; City; State; Zip Code 2855 Mangum Road Suite B106 Houston, TX 77092 |
|-----------------------|---|

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|-------------------------------|---|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ride from AWA Holiday party to AZA event |
|-------------------------------|---|--|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

| | |
|--------------------|--------------------|
| Date 12/10/2024 | Payee name Lyft |
|--------------------|--------------------|

| | |
|-----------------------|---|
| Amount (\$) \$9.14 | Payee address; City; State; Zip Code 2855 Mangum Road Suite B106 Houston, TX 77092 |
|-----------------------|---|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ride to ABOTA Juror appreciation lunch |
|-------------------------------|---|--|

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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 15/25 Rpt: 58/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
|--|---|--|

| | |
|-----------------------------|---------------------------------|
| 4 Date 12/13/2024 | 5 Payee name M Penner |
|-----------------------------|---------------------------------|

| | |
|---------------------------------|---|
| 6 Amount (\$) \$45.55 | 7 Payee address; City; State; Zip Code 1180-06 Uptown Park Blvd. Houston, TX 77056 |
|---------------------------------|---|

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gifts for departing judges |
|---------------------------------|--|--|

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|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|---|
| Date 11/04/2024 | Payee name McGowen Professional Suites |
|--------------------|---|

| | |
|-------------------------|--|
| Amount (\$) \$200.00 | Payee address; City; State; Zip Code 1300 McGowen Street Houston, TX 77004 |
|-------------------------|--|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign office/address rent |
|-------------------------------|---|--|

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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

| | |
|--------------------|---|
| Date 12/13/2024 | Payee name McGowen Professional Suites |
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|------------------------|--|
| Amount (\$) \$50.00 | Payee address; City; State; Zip Code 1300 McGowen Street Houston, TX 77004 |
|------------------------|--|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rental for campaign office/address |
|-------------------------------|---|--|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 16/25 Rpt: 59/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
|--|---|--|

| | |
|-----------------------------|----------------------------------|
| 4 Date 12/29/2024 | 5 Payee name MerchBlue |
|-----------------------------|----------------------------------|

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|---------------------------------|---|
| 6 Amount (\$) \$49.36 | 7 Payee address; City; State; Zip Code 14833 ME 87th St. Redmond, WA 98052 |
|---------------------------------|---|

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign merchandise |
|---------------------------------|--|--|

| | | | |
|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|-----------------------|
| Date 11/05/2024 | Payee name Ninfa's |
|--------------------|-----------------------|

| | |
|-------------------------|---|
| Amount (\$) \$169.28 | Payee address; City; State; Zip Code 2704 Navigation Blvd Houston, TX 77003 |
|-------------------------|---|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Election night dinner with campaign staff |
|-------------------------------|--|---|

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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

| | |
|--------------------|---------------------------|
| Date 10/28/2024 | Payee name Origin Bank |
|--------------------|---------------------------|

| | |
|------------------------|---|
| Amount (\$) \$25.00 | Payee address; City; State; Zip Code 2049 West Gray Houston, TX 77019 |
|------------------------|---|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire transfer fee |
|-------------------------------|---|---|

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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|---|
| 1 Total pages Schedule F1: Sch: 17/25 Rpt: 60/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/28/2024 | 5 Payee name Origin Bank | |
| 6 Amount (\$) \$15.00 | 7 Payee address; City; State; Zip Code 2049 West Gray Houston, TX 77019 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Incoming wire transfer fee for the National Democratic Redistricting Fee donation |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/22/2024 | Payee name Pappas Bros Steakhouse | |
| Amount (\$) \$1,818.10 | Payee address; City; State; Zip Code 1200 McKinney Houston, TX 77010 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Court holiday dinner |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/02/2024 | Payee name Pluckers Wing Bar | |
| Amount (\$) \$22.66 | Payee address; City; State; Zip Code 2222 Rio Grande St. Suite D116 Austin, TX 78705 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dinner in Austin for meetings |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 18/25 Rpt: 61/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 10/27/2024 | 5 Payee name Raise the Money, Inc. | |
| 6 Amount (\$) \$5.15 | 7 Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation platform processing fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/06/2024 | Payee name Raise the Money, Inc. | |
| Amount (\$) \$0.79 | Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation platform processing fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/08/2024 | Payee name Raise the Money, Inc. | |
| Amount (\$) \$0.79 | Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation platform processing 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.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 19/25 Rpt: 62/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
|--|---|--|

| | |
|-----------------------------|---|
| 4 Date 11/03/2024 | 5 Payee name Ruth's Chris Steak House |
|-----------------------------|---|

| | |
|----------------------------------|--|
| 6 Amount (\$) \$364.46 | 7 Payee address; City; State; Zip Code 107 W. 6th Street Austin, TX 78701 |
|----------------------------------|--|

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dinner with campaign volunteers in Austin |
|---------------------------------|--|---|

| | | | |
|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|--------------------------------|
| Date 11/06/2024 | Payee name Shipley's Donuts |
|--------------------|--------------------------------|

| | |
|------------------------|--|
| Amount (\$) \$55.86 | Payee address; City; State; Zip Code 1800 Louetta Spring, TX 77388 |
|------------------------|--|

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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast for jury |
|------------------------|---|---|

| | | | |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

| | |
|--------------------|--------------------------------|
| Date 11/12/2024 | Payee name Shipley's Donuts |
|--------------------|--------------------------------|

| | |
|------------------------|--|
| Amount (\$) \$65.58 | Payee address; City; State; Zip Code 1800 Louetta Spring, TX 77388 |
|------------------------|--|

| | | |
|------------------------|---|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast for jury |
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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.

| | | |
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| 1 Total pages Schedule F1: Sch: 20/25 Rpt: 63/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/15/2024 | 5 Payee name Shipley's Donuts | |
| 6 Amount (\$) \$41.17 | 7 Payee address; City; State; Zip Code 1800 Louetta Spring, TX 77388 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast for jury |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/16/2024 | Payee name Shipley's Donuts | |
| Amount (\$) \$72.09 | Payee address; City; State; Zip Code 1800 Louetta Spring, TX 77388 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast for jury |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/05/2024 | Payee name Taco Cabana | |
| Amount (\$) \$68.28 | Payee address; City; State; Zip Code 105 Louetta Crossing Spring, TX 77373 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast for Jury |
| 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.

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| 1 Total pages Schedule F1: Sch: 21/25 Rpt: 64/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 11/14/2024 | 5 Payee name Taco Cabana | |
| 6 Amount (\$) \$68.28 | 7 Payee address; City; State; Zip Code 105 Louetta Crossing Spring, TX 77373 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast for jury |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/19/2024 | Payee name Taco Cabana | |
| Amount (\$) \$74.44 | Payee address; City; State; Zip Code 105 Louetta Crossing Spring, TX 77373 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast for Jury |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/12/2024 | Payee name Taco Cabana | |
| Amount (\$) \$61.89 | Payee address; City; State; Zip Code 105 Louetta Crossing Spring, TX 77373 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast for jury |
| 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.

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| 1 Total pages Schedule F1: Sch: 22/25 Rpt: 65/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
| 4 Date 12/20/2024 | 5 Payee name Taco Cabana | |
| 6 Amount (\$) \$63.85 | 7 Payee address; City; State; Zip Code 105 Louetta Crossing Spring, TX 77373 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast for jury |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/22/2024 | Payee name The Caucus.org | |
| Amount (\$) \$40.00 | Payee address; City; State; Zip Code P.O. Box 66664 Houston, TX 77266 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (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 membership fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/21/2024 | Payee name The Houstonian Valet | |
| Amount (\$) \$21.00 | Payee address; City; State; Zip Code 111 North Post Oak Lane Houston, TX 77024 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Valet parking for TACTAS dinner |
| 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.

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|----------|---|--|---|---------------|---|
| 1 | Total pages Schedule F1: Sch: 23/25 Rpt: 66/68 | 2 | FILER NAME Weems, Christine (The Honorable) | 3 | Filer ID (Ethics Commission Filers) 00081859 |
| 4 | Date 11/21/2024 | 5 | Payee name The Houstonian | | |
| 6 | Amount (\$) \$134.58 | 7 | Payee address; City; State; Zip Code 111 North Post Oak Lane Houston, TX 77024 | | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TACTAS Lifetime achievement event | | |
| 9 | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | Date 12/13/2024 | | Payee name Tiffany's | | |
| | Amount (\$) \$175.90 | | Payee address; City; State; Zip Code 5015 Westheimer Road, Suite 2100 Houston, TX 77056 | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gifts for outgoing judges | | |
| | | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | Date 11/06/2024 | | Payee name Treebeards | | |
| | Amount (\$) \$103.92 | | Payee address; City; State; Zip Code 1117 Texas Street Houston, TX 77002 | | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff lunch | | |
| | | 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.

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| 1 Total pages Schedule F1: Sch: 24/25 Rpt: 67/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
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| 4 Date 11/03/2024 | 5 Payee name University of Texas Parking |
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| 6 Amount (\$) \$18.00 | 7 Payee address; City; State; Zip Code 1815 Trinity St. Austin, TX 78712 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking for speaking event at the law school |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 12/22/2024 | Payee name Walgreens |
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| Amount (\$) \$54.76 | Payee address; City; State; Zip Code 2612 Smith Street Houston, TX 77006 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday gifts for clerks |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 11/11/2024 | Payee name Whataburger |
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| Amount (\$) \$97.73 | Payee address; City; State; Zip Code 2115 FM 2920 Road Spring, TX 77388 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast for jury |
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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)

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| 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 - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 25/25 Rpt: 68/68 | 2 FILER NAME Weems, Christine (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081859 |
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| 4 Date 12/17/2024 | 5 Payee name Whataburger |
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| 6 Amount (\$) \$97.73 | 7 Payee address; City; State; Zip Code 2115 FM 2920 Road Spring, TX 77388 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast for jury |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 11/20/2024 | Payee name Wix.com |
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| Amount (\$) \$467.64 | Payee address; City; State; Zip Code P.O. Box 40190 San Francisco, CA 94140 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Renewal of website and app design |
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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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