#### JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

тł	ne JC/OH Instruction	Guide explains how to comp	plete this form.	1 Filer ID (Ethics Commi	ssion Filers)	2 Total pages fi	led:	
				00088276		1	.2	
3	CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY	
	NAME	Ms.	Brendetta Ant	hony		Date Received		
						ELECTRONIC		
						01/15/2025		
		NICKNAME	LAST		SUFFIX	01/15/2025		
			Scott					
4	CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Y;	ZIP CODE	Date Hand-delivered of	or Date Postmarked	
	OFFICEHOLDER MAILING	P.O. Box 1284						
	ADDRESS					Receipt #	Amount	
	Change of Address	Missouri City, TX 77459						
						Date Processed		
						Date Imaged		
5	CAMPAIGN	MS / MRS / MR	FIRST			MI		
	TREASURER	Ms.	Elvina Renea					
	NAME		Livina Konou					
		NICKNAME	LAST			SUFFIX		
			Davis					
L								
6	CAMPAIGN TREASURER	STREET ADDRESS (NO PO	BOX PLEASE);	AP.	T / SUITE #; CITY;	ST	ATE; ZIP CODE	
	ADDRESS	1326 Mossridge						
	(Residence or Business)							
		Missouri City, TX 77489						
7	CAMPAIGN TREASURER		IE NUMBER	EXTENSION				
	PHONE	(832) 244-1302						
	55007							
8	REPORT TYPE	X January 15	30th day before		Runoff	15th day after ca	mpaign treasurer	
		X January 15	Sour day before			appointment (offi		
		July 15	8th day before	election	Exceeded modified	Final Report (Atta	ach C/OH-FR)	
			_		reporting limit	_		
9	PERIOD	Month Day Year			Month Day	Year		
	COVERED	10/27/2024	TF	IROUGH	12/31/202	4		
10	ELECTION	ELECTION DATE			ELECTION TYPE			
		Month Day Year		rimary	Runoff	Other		
		11/05/2024		eneral	Special			
			X G	enerai	Special			
L								
11	OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		District First	
					Court Of Appeals	s, Justice Place A	2 District First	
L								
1								
	GO TO PAGE 2							
Ē	rms provided by To	xas Ethics Commission	1474444 0+	hics.state.tx.u	c	Vorei	on V4.1.0.5dd2ace2	
10	ins provided by Te	AUD EU1100 COUTIEI1001011	vvvvv.et			v Ci Si	v <del>.</del>	

#### JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH **COVER SHEET PG 2** 2 of 12

I

13 C / OH NAME	Scott, Brendetta Anth	iony (Ms.)	L4 Filer ID 00088276	(Ethics Comm	ission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditur. These expenditures may have been made without the d officeholders are required to report this information	e candidate's or offic	eholder's knov	vledge or
Additional Pages		COMMITTEE NAME			
	GENERAL				
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	5		
16 CONTRIBUTION TOTALS	1. TOTAL UNITEM OR GUARANTE	\$	0.00		
			\ \	\$	200.00
EXPENDITURE	· · · · · · · · · · · · · · · · · · ·	PLEDGES, LOANS, OR GUARANTEES OF LOANS IZED POLITICAL EXPENDITURES	)	\$	0.00
TOTALS	4. TOTAL POLIT	ICAL EXPENDITURES		\$	7,893.39
CONTRIBUTION	5. TOTAL POLITIC	AL CONTRIBUTIONS MAINTAINED AS OF THE LA	ST DAY OF THE	-	
BALANCE	REPORTING PE	RIOD		\$	0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOF	PAL AMOUNT OF ALL OUTSTANDING LOANS AS ( TING PERIOD	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.			
		Ms. Bren	detta Anthony Scot	tt	
		Signature of C	Candidate or Officeho	older	
AFFIX NC	TARY STAMP / SEAL AB	OVE			
Sworn to and subs	cribed before me, by the s	aid	, this the		day
of	, 20, to c	ertify which, witness my hand and seal of office.			
Signature of off	cer administering oath	Printed name of officer administering oath	Title of office	er administerin	g oath
Forms provided by Te	exas Ethics Commission	www.ethics.state.tx.us		Version V4.:	1.0.5dd2ace2

## FORM JC/OH COVER SHEET PG 3

						3 of 12
18		R NAM	IE ndetta Anthony (Ms.)	<b>19</b> Filer ID 00088276	(Ethi	cs Commission Filers)
20	SCH	IEDUL	E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
	1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	200.00
	2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
	3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
	4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
	5.	Х	\$	1,919.95		
	6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
	7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
	8.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	838.94
	9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	5,134.50
	10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
	11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	ONS	\$	
	12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

SUBTOTALS - JC/OH

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 **1** Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 4/12 2 FILER NAME **3** Filer ID (Ethics Commission Filers) Scott, Brendetta Anthony (Ms.) 00088276 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 7 10/28/2024 \$200.00 Jeems, Latoya 6 Contributor address; City; State; Zip Code Cordova, TN 38018 Contributor's Principal Occupation 9 Contributor's Job Title 8 Principal Principal 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) N/A 12 If contributor is a child, law firm of parent(s) (if any)

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 1/5 Rpt: 5/12		Scott, Brendetta Anthony (Ms.)					00088276	
4	Date	5	Payee name						
	10/31/2024		AB Canvassing Incorporated						
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip Co	de				
	\$88.00		8331 Northern St.						
			Houston, TX 77071						
8	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	<b>(b)</b> De	escription			
			Polling Expense	concautoj			outsio	de of Texas. Com	plete Schedule T.
	EXPENDITURE					1	TX,	officeholder living	expense
					Po	oll Workers			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght			Office he	ld
	Date		Payee name						
	10/28/2024		Bailey, Cynthia						
	Amount (\$)		Payee address; City; Sta	ate; Zip Co	de				
	\$1,487.50		7830 Flintridge						
	<i>,</i>								
			Houston, TX 77028						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Polling Expense	schedule)		1		de of Texas. Comp officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	Office sou	ght			Office he	ld
	Date		Payee name						
	11/25/2024		Fort Bend County Democratic Party						
	Amount (\$)		Payee address; City; Sta	ate; Zip Co	de				
	\$20.00		13515 Southwest Fwy #204						
			,,,,,,,						
			Sugar Land, TX 77478						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b) De	escription			
	EXPENDITURE		Contributions/Donations Made By			1		de of Texas. Comp officeholder living	
			Candidate/Officeholder/Political Cor	nmittee		1			ty Monthly Democratic
				- <i>1</i>		9			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght			Office he	9ICI

EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/_ I Co	Event Expense Loan Fees Office Food/Beverage Expense Pollin Gift/Awards/Memorials Expense Printi mmittee Legal Services Salar	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 2/5 Rpt: 6/12		Scott, Brendetta Anthony (Ms.)				00088276		
4	Date	5	Payee name						
	12/26/2024		Fort Bend Democratic Party						
6	Amount (\$)	7	Payee address; City; State; Zip	Code					
	\$20.00		13515 Southwest Fwy						
			Ste. 204						
			Sugar Land, TX 77478						
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	) Description				
-	OF		Contributions/Donations Made By			outsi	de of Texas. Complete Schedule T.		
	EXPENDITURE		Candidate/Officeholder/Political Committee				officeholder living expense		
					•	tio	n to Ft. Bend County Democratic		
					Party				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office	sought	t		Office held		
	Date		Payee name						
	11/25/2024		Godaddy						
	Amount (\$)		Payee address; City; State; Zip	Code					
	\$24.51		2150 E. Warner Rd						
			Tempe, AZ 85284						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Advertising Expense	(b)		, тх,	de of Texas. Complete Schedule T. officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office	l sought	t		Office held		
	Date		Payee name						
	12/23/2024		Godaddy						
	Amount (\$)		Payee address; City; State; Zip	Code					
	\$31.97		2150 E. Warner Rd						
			Tempe, AZ 85284						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Advertising Expense	(b)		, тх,	de of Texas. Complete Schedule T. officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name Office	sought	l		Office held		

EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Co	Food/Beverage Expense         Polling Expense         Travel in District           Gift/Awards/Memorials Expense         Printing Expense         Travel Out of District				quipment & Related Expense				
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filer	s)
	Sch: 3/5 Rpt: 7/12		Scott, Brendetta	Anthony (Ms.)					00088276		
4	Date	5	Payee name								
	12/30/2024		Houston LGBTQ	+ Political Caucu	IS						
6	Amount (\$)	7	Payee address;	City;	State; Zip	Code					
	\$40.00		401 Branard St 2	2nd Floor							
			Houston, TX 770	006							
8	PURPOSE	(a)	Category (See Cate	gories listed at the top of	this schedule)	(b)	Description				
	OF		Fees	gones listed at the top of			·	outsi	de of Texas. Com	blete Schedule T.	
	EXPENDITURE								officeholder living	expense	
							Membership	ren	ewal fee		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officehol	der name	Office s	ought			Office he	ld	
	Date		Payee name								
	11/07/2024		Pizza Hut								
	Amount (\$)		Payee address;	City;	State; Zip	Code					
	\$51.60		2292 FM 2234 F		, P						
	<b>401.00</b>										
			Missouri City, T>	( 77489							
	PURPOSE	(a)	Category (See Cate	gories listed at the top of	this schedule)	(b)	Description				
	OF EXPENDITURE		Food/Beverage	Expense					de of Texas. Com		
							Meeting after		officeholder living	expense	
							weeting alter	ele	CUON		
	Complete ONLY if direct	<u> </u>	Candidate/Officehol	der name	Office s				Office he	ld	
	expenditure to benefit C/OI		candidate/Onicerior	der name	Onice 3	Jugin			Onice ne	10	
_	Date	<u> </u>	Payee name								
	11/01/2024		Shipley Do-Nuts								
					04-4	21 -					
	Amount (\$)		Payee address;	City;	State; Zip	Code					
	\$41.37		611 Dulles Ave.								
			Stafford, TX 774	77		_					
	PURPOSE	(a)	Category (See Cate	gories listed at the top of	this schedule)	(b)	Description				
	OF EXPENDITURE		Food/Beverage	Expense					de of Texas. Com		
									officeholder living	expense	
							Donuts for po	лι Μ	UIKEIS		
	0 1. 0				~~~	<u> </u>					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officehol	der name	Office s	ought			Office he	ld	
		•									

EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mittee Legal Services		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 4/5 Rpt: 8/12		Scott, Brendetta Antho	ony (Ms.)				00088276		
4	Date	5	Payee name							
	12/24/2024		Wells Fargo Bank							
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	le				
	\$35.00		2440 Texas Parkway							
		<u> </u>	Missouri City, TX 7748	39						
8	PURPOSE OF	(a)	Category (See Categories lis	sted at the top of this sch	edule)	(b) Description				
	EXPENDITURE		Fees					ide of Texas. Comp , officeholder living (		
						Overdraft Fe				
							.,			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder na	me C	Dffice sou	Jht		Office hel	d	
	Date		Payee name							
	12/27/2024		Wells Fargo Bank							
	Amount (\$)		Payee address; City;	State;	Zip Co	le				
	\$35.00		2440 Texas Parkway							
			Missouri City, TX 7748	39						
	PURPOSE					(b) Description				
	OF		Category <sub>(See Categories lis</sub> Fees	ated at the top of this sch	edule)		outsi	ide of Texas. Comp	lete Schedule T.	
	EXPENDITURE							, officeholder living		
						Overdraft Fe	e, v	vhich will be r	reconciled	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder na	me C	Office sou	Int		Office hel	a	
	Date		Payee name							
	12/31/2024		Wells Fargo Bank							
	Amount (\$)		Payee address; City;	State;	Zip Co	le				
	\$35.00		2440 Texas Parkway							
			Missouri City, TX 7748	39						
	PURPOSE OF	(a)	Category (See Categories lis	sted at the top of this sch	edule)	(b) Description				
	EXPENDITURE		Fees					ide of Texas. Comp , officeholder living (		
						Overdraft Fe				
							⊂, v			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder na	me C	Dffice sou	ıht		Office hel	d	

				EXPENDITUR	E CATEGO	RIES FOR	BOX	8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage Expens Gift/Awards/Memorials Legal Services	e Expense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	yment/Re head/Re ense pense ages/Co	eimbursement Intal Expense ntract Labor		Solicitation/Fund Transportation Ed Travel in District Travel Out of Dis OTHER (enter a	quipment & Rela trict	
	-			The Instruction Gu	ide explains	how to cor	nplete	this form.				
1	Total pages Schedule F1:	2	FILER NAM	IE					3	Filer ID	(Ethics Com	nission Filers)
	Sch: 5/5 Rpt: 9/12		Scott, Brer	ndetta Anthony (M	ls.)					00088276		
4	Date	5	Payee name	9								
	12/31/2024		Wells Farg									
6	Amount (\$)		Payee addr		Ctoto	; Zip Co	10					
0					Siale	, zip cou	Je					
	\$10.00		2440 1888	ls Parkway								
			Missouri C	ity, TX 77489								
8	PURPOSE	(a)	Category (	See Categories listed at th	e ton of this sch	edule)	( <b>b)</b> De	escription				
	OF		Fees			iouulo)	Г		outsic	le of Texas. Comp	olete Schedule T	
	EXPENDITURE							Check if Austin	, TX,	officeholder living	expense	
							SE	ervice fee				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Of	ficeholder name	(	Office sou	jht			Office he	ld	

		EXPE	ENDITURE CATEGO	RIES FOR BOX 10(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By	Event Exp Fees Food/Beve Gift/Award	ense rage Expense s/Memorials Expense	Office Overhead/Rental Expense Polling Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District					
	Candidate/Officeholder/Politica	l Committee Legal Serv	ices	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)					
			ruction Guide explains	how to complete this form.						
1	Total pages Schedule F4:				<b>3</b> Filer ID (Ethics Commission Filers)					
	Sch: 1/1 Rpt: 10/12	Scott, Brendetta Ar		1	00088276					
4	CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES	) <b>\$</b>					
	ISSUER	Capital (	One Bank	CHARGED TO A CREDI CARD						
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid					
		\$189.44	11/05/2024							
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code					
				6820 Harwin Dr.						
		Allied Signs								
				Houston, TX 77036						
8	PURPOSE OF	(a) Category		(b) Description						
	EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Yard signs						
	X Political									
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	e T. Check if Austin, T	X, officeholder living expense					
9	Complete ONLY if direct	Candidate/Officeholder	name C	Office sought	Office held					
e	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	er Paid					
		\$649.50	10/31/2024							
	PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code					
				6820 Harwin Dr.						
		Allied Signs								
				Houston, TX 77036						
	PURPOSE OF	(a) Category (See Categories listed at the top	of this schodule)	(b) Description						
		Advertising Expense	of this schedule)	Push cards						
	X Political									
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	e T. Check if Austin, T	X, officeholder living expense					
	Complete ONLY if direct	Candidate/Officeholder	name C	Office sought	Office held					
e	xpenditure to benefit C/OH									

**EXPENDITURES MADE BY CREDIT CARD** 

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office C Food/Beverage Expense Polling y - Gift/Awards/Memorials Expense Printing	epayment/Reimbursement     Solicitation/Fundraising Expense       verhead/Rental Expense     Transportation Equipment & Related Expense       Expense     Travel in District       Wages/Contract Labor     OTHER (enter a category not listed above)				
1 Total pages Schedule G: Sch: 1/2 Rpt: 11/12	2 FILER NAME Scott, Brendetta Anthony (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088276				
4 Date 10/28/2024	Payee name AB Canvassing Incorporated					
6 Amount (\$) \$2,697.00	7 Payee address; City; State; Zip Code 8331 Northern St. Houston, TX 77071					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Poll workers and canvassing				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
Date 11/01/2024	Payee name Bailey, Cynthia					
Amount (\$) \$1,487.50 Reimbursement from political contributions intended	Payee address; City; State; Zip C 7830 Flintridge Houston, TX 77028	Code				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Polling Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Poll workers and canvassing				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
Date 11/04/2024	Payee name Bailey, Cynthia					
Amount (\$) \$300.00	Payee address; City; State; Zip C 7830 Flintridge	Code				
Reimbursement from political contributions intended	Houston, TX 77028					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Canvassing and Literature Drop				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing E	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1 Total pages Schedule G: Sch: 2/2 Rpt: 12/12	2 FILER NAME Scott, Brendetta Anthony (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088276				
4 Date 11/12/2024	5 Payee name Bailey, Cynthia						
6 Amount (\$) \$500.00	7 Payee address;     City;     State; Zip Code       7830 Flintridge						
Reimbursement from political contributions intended	Houston, TX 77028						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description [ Fee to pick up a	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense nd dispose campaign signs				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held				
Date 10/28/2024	Payee name Brown, Robert						
Amount (\$) \$150.00 Reimbursement from political contributions	Payee address; City; State; Zip C 4315 Wuthering Heights Dr.	ode					
PURPOSE	Houston, TX 77045 Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.				
OF EXPENDITURE	Polling Expense	Poll worker	Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	I Candidate/Officeholder name	Office sought	Office held				