CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

	FORM	C/OH
COVER	SHEE	T PG 1

OFFICEHOLDER MALING ADDRESS 3422 Business Center Dr. Ste. 106-7 Pearland, TX 77584 Imcoult Imcoult Imcoult Imcoult Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immode Immo	Th	e C/OH Instruction (Guide explains how to compl	ete this form.	1 Filer ID (Ethics Commis 00085777	sion Filers)	2 Total pages	filed: 6
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CAMPAIGN TREASURER Pearland, TX 77584 Date Processed Date Invaced		MAILING	3422 Business Center Dr.	Ste. 106-7			Receipt #	Amount
CAMPAIGN TRESJURER Mr. Craig Mr. Craig NICKNAME LAST LeTulle SUFFIX LeTulle G CAMPAIGN TREESURER ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY: STATE: ZIP CODE 403 Insurance Rd. Richmond, TX 77469 COMPAIGN TREESURER Richmond, TX 77469 CAMPAIGN TREESURER Richmond, TX 77469 CAMPAIGN TREESURER Richmond, TX 77469 CAMPAIGN TREESURER AREA CODE PHONE NUMBER EXTENSION TREESURER Richmond, TX 77469 PHONE C281) 914-3690 R TYPE AREA CODE PHONE NUMBER EXTENSION TREESURER AREA CODE TREESURER AREA CODE AREA CODE TREESURER AREA CODE AREA CODE AREA CODE AREA CODE TREESURER AREA CODE AREA CODE AREA CODE AREA CODE TREESURER AREA CODE AREA AREA CODE AREA CODE AREA AREA CODE AREA CODE AR			Pearland, TX 77584					
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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 6

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13 C / OH NAME	Pickren, Julie M. (The	e Honorable)	14 Filer ID 00085777	(Ethics Commission Filers				
15 NOTICE FROM POLITICAL COMMITTEE(S)	ommittees to support the eholder's knowledge or otice of such expenditures.							
Additional Pages								
	GENERAL COMMITTEE ADDRESS							
	SPECIFIC							
	COMMITTEE CAMPAIGN TREASURER NAME							
		COMMITTEE CAMPAIGN TREASURER ADDRE	ESS					
16 CONTRIBUTION TOTALS		I IZED POLITICAL CONTRIBUTIONS (OTHER TH ES OF LOANS, OR CONTRIBUTIONS MADE EL		\$ 0.0				
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	JS)	\$ 150.0				
EXPENDITURE TOTALS	3. TOTAL UNITEM	\$ 0.0						
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 2,343.2				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	\$ 33,846.4						
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	S OF THE LAST DAY	\$ 0.0					
17 AFFIDAVIT	•			•				
		l swear, or affirm, under pena true and correct and includes under Title 15, Election Code.	all information required					
		The Hor	norable Julie M. Pickre	en				
		Signature	of Candidate or Officeho	lder				
AFFIX NO	TARY STAMP / SEAL AB	OVE						
Sworn to and subsc	ribed before me, by the s	aid	, this the	day				
of	, 20, to c	ertify which, witness my hand and seal of office.						
Signature of offic	er administering	Printed name of officer administering	Title of office	r administering oath				
Forms provided by Tex	xas Ethics Commissior	www.ethics.state.tx.us		Version V4.1.0.5dd2ac				

SUBT	FOR OVER SHE	M C/OH ET PG 3 3 of 6		
18 FILER NA Pickren, 、	ME Julie M. (The Honorable)	19 Filer ID 00085777	(Ethics Comm	ssion Filers)
20 SCHEDUL NAME OF	SUBTOT	AL AMOUNT		
1. X	\$	150.00		
2.	\$			
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	2,343.26
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 4/6 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Pickren, Julie M. (The Honorable) 00085777 5 Full name of contributor Amount of Contribution (\$) 4 Date out-of-state PAC (ID#: 7 10/15/2024 \$50.00 Crowe, Cassandra 6 Contributor address; City; State; Zip Code Conroe, TX 77302 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) **Texas House of Representatives** Advisor Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/30/2024 \$100.00 McFarlan, Tam Contributor address; City; State; Zip Code Katy, TX 77494 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Real Estate** Self

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/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: 1/2 Rpt: 5/6		Pickren, Julie M. (The Honoral	ble)				00085777	
4	Date	5	Payee name						
	12/31/2024		Anedot, Inc.						
6	Amount (\$)	7	Payee address; City;	State	; Zip Coo	le			
	\$6.30		1340 Poydras #1770						
		<u> </u>	New Orleans, LA 70112						
8	PURPOSE OF	(a)	Category (See Categories listed at the to	op of this sch	nedule)	(b) Description			
	EXPENDITURE		Fees					ide of Texas. Complete Schedule T.	
								, officeholder living expense tion service fees.	
						Campaign ut	ла		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	(Office soug	ht		Office held	
	Date		Payee name						
	07/31/2024		Dock Line Media						
	Amount (\$)	-	Payee address; City;	State	; Zip Coo	le			
	\$1,872.00		33219 Forest W. St.	Olule	, 20 000				
	\$1,072.00		33219 FUIESI W. 31.						
			Magnolia, TX 77534						
	PURPOSE OF		Category (See Categories listed at the to	op of this sch	nedule)	(b) Description			
	EXPENDITURE		Advertising Expense					ide of Texas. Complete Schedule T. , officeholder living expense	
								er, and website services. July -	
December 2024 payment.									
	Complete ONLY if direct		andidate/Officeholder name	() Office soug	ht		Office held	_
	expenditure to benefit C/OI	H							
	Date		Payee name						_
	09/09/2024		La Brisa						
	Amount (\$)		Payee address; City;	State	; Zip Coo	le			
	\$65.00		501 N Wesley Dr.						
			League City, TX 77573						
	PURPOSE OF		Category (See Categories listed at the to	op of this sch	nedule)	(b) Description	out	ide of Toyon, Complete Cabadule T	
	EXPENDITURE		Food/Beverage Expense					ide of Texas. Complete Schedule T. , officeholder living expense	
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	expenditure to benefit C/OI								
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1