CORRECTION/AMENDMENT AFFIDAVIT FORM COR-PAC FOR POLITICAL COMMITTEE Filer ID (Ethics Commission Filers) 2 Total pages filed: **OFFICE USE ONLY** 00015507 Date Received COMMITTEE Harris County Democratic Party (CEC) **ELECTRONICALLY FILED** NAME 02/14/2025 TREASURER Doyle, Michael P. NAME Date Hand-delivered or Date Postmarked **ORIGINAL** January 15 Runoff REPORT TYPE Receipt # Amount July 15 10th day after campaign treasurer resignation Dissolution report 30th day before election Date Processed 8th day before election Other (specify) ORIGINAL PERIOD Month Year Year Month Day Day Date Imaged **COVERED THROUGH** 06/06/2024 06/30/2024 **EXPLANATION OF CORRECTION** We are amending this report to correct the presentation of several ActBlue Texas Contributions. These contributions were originally reported as direct contributions from the ActBlue Texas PAC itself. We are now reporting the contributions under the information of the individual contributor. There are no changes to the totals on any line item or the amount of political contributions maintained or principal amount of any debt at the end of the period. AFFIDAVIT I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Check the box next to any and all applicable statements: Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith. Michael P. Doyle Signature of Campaign Treasurer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said ____, this the _____ _____, 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 Remember To Attach Any Part Of The Campaign Finance Report Form **Needed To Report And Explain Corrections**

FORM CEC COUNTY EXECUTIVE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The CEC Instruction Guide explains how to complete this form. 31 00015507 3 COMMITTEE NAME **OFFICE USE ONLY** Harris County Democratic Party (CEC) Date Received **ELECTRONICALLY FILED** 02/14/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 4619 Lyons Avenue Date Hand-delivered or Date Postmarked Suite A Change of Address Houston, TX 77020 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Michael P. NAME NICKNAME LAST **SUFFIX** Doyle STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 4619 Lyons Ave STREET **ADDRESS** (Residence or Business) Houston, TX 77020 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 3401 Allen Parkway MAILING **ADDRESS** Suite 100 Houston, TX 77019 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 554-9079 PHONE REPORT January 15 30th day before election Final Report **TYPE** 10th day after campaign treasurer 8th day before election July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 06/06/2024 06/30/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Harris County Democra	tic Party (CEC)		0001550	07
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOAN CONTRIBUTIONS	ED POLITICAL CONTRIBUTIONS (OTHER THAN S, OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) ort qualifies for the higher itemization threshold	\$	0.00
		CAL CONTRIBUTIONS LEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	16,671.50
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITION	CAL EXPENDITURES	\$	74,650.30
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT	L CONTRIBUTIONS MAINTAINED AS OF THE LAST ING PERIOD	DAY \$	46,033.84
OUTSTANDING LOAN TOTALS		L AMOUNT OF ALL OUTSTANDING LOANS AS OF T E REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	•		L	
		I swear, or affirm, under penalty of pe true and correct and includes all informunder Title 15, Election Code.		
		Michael	P. Doyle	
		Signature of Car		surer
AFFIX NOTARY	STAMP / SEAL ABOV	E		
Sworn to and subscribed	before me, by the said	, tł	nis the _	day
of	_, 20, to certi	fy which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of o	fficer administering oath

SUBTOTALS - CEC

FORM CEC **COVER SHEET PG 3**

					4 of 31
17 CO	MMITTE	EE NAME	18 Filer ID	(Ethic	cs Commission Filers)
На	rris Co	unty Democratic Party (CEC)	00015507		
		SUBTOTALS			SUBTOTAL AMOUNT
NA	ME OF :	SCHEDULE		<u> </u>	
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	16,671.50
2.		\$			
3.		\$			
4.		\$			
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	74,650.30
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
10.	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	13.50

	MONET	ARY POLITICAL CONTRIBUTI	ON	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 1/10 Rpt: 5/31	
2	FILER NAME Harris Count	ry Democratic Party (CEC)			3	Filer ID (Ethics Commission 00015507	n Filers)
4	Date 06/26/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$15.00
_		Houston, TX 77027-4105	1-		_		
8	•	pation / Job title (See Instructions)	9	Employer (See Instructions City of Houston	S)		
	Date 06/28/2024	Full name of contributor)		Amount of Contribution (\$)	\$15.00
		Houston, TX 77049-5701					
	Principal occu Justice of the	pation / Job title (See Instructions) e Peace		Employer (See Instructions Harris County Precinct 3		lace 2	
	Date 06/19/2024	Full name of contributor out-of-state PAC (ID#Berg, Janice L Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$35.00
		Houston, TX 77080-7607					
	Principal occu Judge	pation / Job title (See Instructions)		Employer (See Instructions State of Texas	s)		
	Date 06/29/2024	Full name of contributor out-of-state PAC (ID# Briones, Lesley Contributor address; City; State; Zip Code Houston, TX 77008-3903)		Amount of Contribution (\$)	\$125.00
	Principal occu Commission	pation / Job title (See Instructions) er		Employer (See Instructions Harris County	5)		
	Date 06/09/2024	Full name of contributor out-of-state PAC (ID# Brownscombe, Tom Contributor address; City; State; Zip Code Houston, TX 77005	<i>t</i> :		•	Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
			ı				

	MONET	ARY POLITICAL CONTR	IBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to compl	ete this forr	n.	1	Total pages Schedule A1: Sch: 2/10 Rpt: 6/31	
2	FILER NAME Harris Count	y Democratic Party (CEC)			3	Filer ID (Ethics Commission 00015507	n Filers)
4	Date 06/27/2024	Craft-Demming, Tamika	te PAC (ID#:		7	Amount of Contribution (\$)	\$60.00
8	Dringinal occu	Humble, TX 77346-3127 pation / Job title (See Instructions)	lo.	Employer (See Instructions	_		
0	Judge	pation / Job title (See Instructions)	l ⁹	State of Texas	')		
	Date 06/30/2024	Crenshaw, Jan				Amount of Contribution (\$)	\$10.00
	Dringing agg	Houston, TX 77015	1	Employer (See Instructions	_		
	Retired	pation / Job title (See Instructions)		Employer (See Instructions Not Employed)		
	Date 06/09/2024	Full name of contributor out-of-state Darrah, Glenn Contributor address; City; State; Zip Code	te PAC (ID#:)		Amount of Contribution (\$)	\$35.00
		Houston, TX 77025-4543					
	Principal occu Economic Ar	pation / Job title (See Instructions) nalyst		Employer (See Instructions StaffLink Inc	i)		
	Date 06/11/2024	Davis, Samantha				Amount of Contribution (\$)	\$125.00
	Principal occu Judge	pation / Job title (See Instructions)		Employer (See Instructions Harris County)		
	Date 06/16/2024	Day, Linda)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed)		
	· •		<u> </u>				

	MONET	ARY POLITICAL CON	TRIBUTION	S		SCHEDULE	■ A1
	The Instru	ction Guide explains how to co	omplete this form	n.	1	Total pages Schedule A1: Sch: 3/10 Rpt: 7/31	
2	FILER NAME Harris Count	y Democratic Party (CEC)			3	Filer ID (Ethics Commission 00015507	ı Filers)
4	Date 06/30/2024	Draper, Genesis	o Code)	7	Amount of Contribution (\$)	\$15.00
		Houston, TX 77021-1646					
8	Principal occu Judge	pation / Job title (See Instructions)		Employer (See Instructions Harris County	5)		
	Date 06/09/2024	Full name of contributor out Duble, Steven Michael Contributor address; City; State; Zip				Amount of Contribution (\$)	\$15.00
	Principal occu	Houston, TX 77098-1426 pation / Job title (See Instructions)		Employer (See Instructions	<u></u>		
	Justice of the			Harris County Texas	,		
	Date 06/25/2024	Full name of contributor out Duble, Steven Michael Contributor address; City; State; Zip	-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
		Houston, TX 77098-1426					
	Principal occu Justice of the	pation / Job title (See Instructions) e Peace		Employer (See Instructions Harris County Texas	5)		
	Date 06/10/2024	Full name of contributor out Dunson, Linda Marie Contributor address; City; State; Zip Houston, TX 77070-4072	-of-state PAC (ID#:			Amount of Contribution (\$)	\$15.00
	Principal occu Judge	pation / Job title (See Instructions)		Employer (See Instructions State of Texas	5)		
	Date 06/15/2024	Full name of contributor out Evans-Shabazz, Carolyn Edwina Contributor address; City; State; Zip Houston, TX 77004-6210				Amount of Contribution (\$)	\$10.00
	Principal occu Council Men	pation / Job title (See Instructions) nber		Employer (See Instructions City of Houston	5)		

	MONET	ARY POLITICAL CONTRIBU	ITION	IS		SCHEDULI	E A1
	The Instru	ction Guide explains how to complete t	his for	m.	1	Total pages Schedule A1: Sch: 4/10 Rpt: 8/31	
2	FILER NAME Harris Count	y Democratic Party (CEC)			3	Filer ID (Ethics Commission 00015507	n Filers)
4	Date 06/16/2024	 Full name of contributor out-of-state PAC Frame, William Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Houston, TX 77034 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> s)		
	Not Employe	ed		Not Employed			
	Date 06/25/2024	Full name of contributor out-of-state PAC Gaido, Colleen Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$15.00
		Houston, TX 77005-3529					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Judge			State of Texas			
	Date 06/26/2024	Full name of contributor out-of-state PAC Garrison, Tanya (Ms.) Contributor address; City; State; Zip Code	C (ID#:)	•	Amount of Contribution (\$)	\$30.00
		Houston Texas, TX 77046-1130					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Attorney	·		State of Texas	•		
	Date 06/23/2024	Full name of contributor out-of-state PAC Gerstenhaber, Suzi Contributor address; City; State; Zip Code Houston, TX 77056)		Amount of Contribution (\$)	\$12.50
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Waldman Smallwood	<u>l</u> S)		
	Date 06/12/2024	Full name of contributor out-of-state PAC Graves-Harrington, Angela Contributor address; City; State; Zip Code Houston, TX 77002-1901)		Amount of Contribution (\$)	\$10.00
	Principal occu Judge	pation / Job title (See Instructions)		Employer (See Instructions State of Texas	<u>1</u> S)		
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	MONEI	ARY POLITICAL CONTR	IBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to compl	ete this form	n.	1	Total pages Schedule A1: Sch: 5/10 Rpt: 9/31	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Harris Count	y Democratic Party (CEC)				00015507	
4	Date 06/23/2024	 Full name of contributor out-of-star out-o	te PAC (ID#:		7	Amount of Contribution (\$)	\$10.00
		Houston, TX 77002-1901					
8	Principal occu Judge	pation / Job title (See Instructions)	9	Employer (See Instructions State of Texas	5)		
	Date 06/27/2024	Full name of contributor out-of-sta Hughes, Erica Roche Contributor address; City; State; Zip Code	te PAC (ID#:)		Amount of Contribution (\$)	\$120.00
		Houston, TX 77035-6635					
	Principal occu Judge	pation / Job title (See Instructions)		Employer (See Instructions Harris County	5)		
	Date 06/27/2024	Full name of contributor out-of-sta Jordan, Darrell W. Contributor address; City; State; Zip Code	e			Amount of Contribution (\$)	\$125.00
		Houston, TX 77018-4504					
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Judge			Harris County			
	Date 06/14/2024	Full name of contributor out-of-sta Judge Charles Spain for Justice Contributor address; City; State; Zip Code Houston, TX 77006-5018	e PAC (ID#:)		Amount of Contribution (\$) \$	10,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date 06/24/2024	Full name of contributor out-of-state Landau, Sarah Beth (Judge) Contributor address; City; State; Zip Code Houston, TX 77009-7214	te PAC (ID#:			Amount of Contribution (\$)	\$30.00
	Principal occu Justice	pation / Job title (See Instructions)		Employer (See Instructions State of Texas First Cou		of Appeals	
			•				

	MONET	ARY POLITICAL CONTRIBU	TION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete th	nis for	m.	1	Total pages Schedule A1: Sch: 6/10 Rpt: 10/31	
2	FILER NAME Harris Count	ty Democratic Party (CEC)			3	Filer ID (Ethics Commission 00015507	n Filers)
4	Date 06/26/2024	 Full name of contributor out-of-state PAC (Morton, Chris Dean Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$125.00
_		Houston, TX 77002	- 1-		_		
8		pation / Job title (See Instructions) District Court Harris County TX	9	Employer (See Instructions State of Texas	S)		
	Date 06/16/2024	Full name of contributor out-of-state PAC (POTDAR, VASANTH Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1.00
	Principal occu	Richmond, TX 77407 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Retired			Not Employed			
	Date 06/07/2024	Full name of contributor out-of-state PAC (Perdue, Nicole Vyrostek Contributor address; City; State; Zip Code	(ID#:			Amount of Contribution (\$)	\$60.00
		Houston, TX 77027-4113					
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Perdue and Kidd	5)		
	Date 06/23/2024	Full name of contributor out-of-state PAC (Pfeiffer-Traum, Deborah Contributor address; City; State; Zip Code HOUSTON, TX 77018				Amount of Contribution (\$)	\$15.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u>l</u> 5)		
	Date 06/09/2024	Full name of contributor out-of-state PAC (Poritz, Darwin Contributor address; City; State; Zip Code Houston, TX 77062)		Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
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	MONET	ARY POLITICAL CONTRIBUTI	IOI	V 3		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 7/10 Rpt: 11/31	
2	FILER NAME Harris Count	ty Democratic Party (CEC)			3	Filer ID (Ethics Commission 00015507	n Filers)
4	Date 06/13/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$25.00
		Houston, TX 77017-3019					
8	•	pation / Job title (See Instructions) s County Criminal Court at Law No. 13	9	Employer (See Instructions Harris County	5)		
	Date 06/09/2024	Full name of contributor out-of-state PAC (ID: Rogers, Barry Contributor address; City; State; Zip Code Houston, TX 77062	#:)		Amount of Contribution (\$)	\$30.00
	Principal occu Engineer	pation / Job title (See Instructions)		Employer (See Instructions CACI NSS Inc.	5)		
	Date 06/12/2024	Full name of contributor out-of-state PAC (ID: Rosenthal, Jon Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$10.00
	Principal occu	Houston, TX 77041-1255 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
		Representative		Texas House of Repres		ratives	
	Date 06/11/2024	Full name of contributor out-of-state PAC (ID: Schaffer, Robert Edward (Mr.) Contributor address; City; State; Zip Code	#:			Amount of Contribution (\$)	\$50.00
	Principal occu Judge	Houston, TX 77096-4133 pation / Job title (See Instructions)		Employer (See Instructions State of Texas	<u> </u> 5)		
	Date 06/21/2024	Full name of contributor out-of-state PAC (ID: Shaw, Penny Contributor address; City; State; Zip Code Houston, TX 77018-6233)		Amount of Contribution (\$)	\$180.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			<u> </u>				

	MONET	ARY POLITICAL CONTRIBUTION	NC	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 8/10 Rpt: 12/31	
2	FILER NAME Harris Count	ty Democratic Party (CEC)			3	Filer ID (Ethics Commission 00015507	on Filers)
4	Date 06/19/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$125.00
_	Deinsinal assu	Seabrook, TX 77586-0942	٦	Frankrija (Cara kashrija tara	_		
8	Judge	pation / Job title (See Instructions)	9	Employer (See Instructions Harris County	5)		
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#: Stanley, Sheryl Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
	Principal occu	Houston, TX 77057 pation / Job title (See Instructions)	1	Employer (See Instructions	·/-		
	Social Work			United Healthcare	·)		
	Date 06/14/2024	Full name of contributor out-of-state PAC (ID#: State Representative Christina Morales Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77003-1624					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 06/14/2024	Full name of contributor out-of-state PAC (ID#: State Representative Christina Morales Contributor address; City; State; Zip Code Houston, TX 77003-1624)	•	Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#: Tollefson, Linda Contributor address; City; State; Zip Code Houston, TX 77096)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)		
			1				

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to con	nplete this forr	n.	1	Total pages Schedule A1: Sch: 9/10 Rpt: 13/31	
2	FILER NAME Harris Count	y Democratic Party (CEC)			3	Filer ID (Ethics Commission 00015507	ı Filers)
4	Date 06/13/2024	Unger, Hilary (Ms.)	-state PAC (ID#:)	7	Amount of Contribution (\$)	\$25.00
		Houston, TX 77079-3170					
8	Principal occu Judge	pation / Job title (See Instructions)	9	Employer (See Instructions Texas	s)		
	Date 06/13/2024	Unger, Hilary (Ms.) Contributor address; City; State; Zip C)		Amount of Contribution (\$)	\$30.00
	Principal occu	Houston, TX 77079-3170 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	Judge			Texas			
	Date 06/07/2024	Full name of contributor out-of Waldrop, Teresa J. Contributor address; City; State; Zip C	-state PAC (ID#:)		Amount of Contribution (\$)	\$30.00
		Houston, TX 77001-0226					
	Principal occu Judge	pation / Job title (See Instructions)		Employer (See Instructions State of Texas	5)		
	Date 06/23/2024	Wang, Peter)		Amount of Contribution (\$)	\$3.00
	Principal occu Geophysicist	pation / Job title (See Instructions)		Employer (See Instructions GeoComputing Group L		:	
	Date 06/18/2024	Watson, Fran J.	-state PAC (ID#:			Amount of Contribution (\$)	\$30.00
	Principal occu Judge	pation / Job title (See Instructions)		Employer (See Instructions Harris County	5)		

	MONETARY POLITICAL CONTRIBUTIONS		SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 10/10 Rpt: 14/31
2	FILER NAME Harris County Democratic Party (CEC)	3	Filer ID (Ethics Commission Filers) 00015507
4	Date 06/30/2024 5 Full name of contributor out-of-state PAC (ID#:) Williams, Elizabeth 6 Contributor address; City; State; Zip Code	7	Amount of Contribution (\$) \$5.00
	Alamogordo, NM 88310		
8	Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed	tions)	
	Date Full name of contributor out-of-state PAC (ID#:) Wu, Gene Yuanzhi (Rep.) Contributor address; City; State; Zip Code Houston, TX 77081-6624		Amount of Contribution (\$) \$2,000.00
	Principal occupation / Job title (See Instructions) Attorney Employer (See Instructions) Gene Wu PC	tions)	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Total pages Cabadala E4	<u>_</u>
1	Total pages Schedule F1: Sch: 1/16 Rpt: 15/31	2 FILER NAME Harris County Democratic Party (CEC) 3 Filer ID (Ethics Commission Filers) 00015507
4	Date	5 Payee name
	06/09/2024	ActBlue Technical Services
6	Amount (\$) \$4.56	7 Payee address; City; State; Zip Code 366 Summer Street
		Somerville, MA 02144-3132
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense ActBlue Fees
		/ totalide i ees
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_	5 .	
	Date	Payee name
	06/16/2024	ActBlue Technical Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$0.84	366 Summer Street
		Somerville, MA 02144-3132
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		ActBlue Fees
		/ KILDIGO T GGG
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/23/2024	ActBlue Technical Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.22	366 Summer Street
		Somerville, MA 02144-3132
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule 1. Check if Austin, TX, officeholder living expense
		ActBlue Fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/16 Rpt: 16/31	Harris County Democratic Party (CEC) 00015507
4	Date	5 Payee name
	06/23/2024	ActBlue Technical Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1.40	366 Summer Street
		Somerville, MA 02144-3132
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		ActBlue Fees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	06/28/2024	Amalgamated Bank
	Amount (\$) \$8.21	Payee address; City; State; Zip Code 275 7th Avenue
	ΨΟ.∠⊥	275 7th Avenue
		New York, NY 10001
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Bank Fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	06/10/2024	Carriere, Kevin
	Amount (\$)	Payee address; City; State; Zip Code
	\$540.61	4619 Lyons Ave
	Ψ0-10.01	Ste A
		Houston, TX 77020
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Payroll - State Activity
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling I Gift/Awards/Memorials Expense Printing Il Committee Legal Services Salaries	Expense Expense/Wages	se s/Contract Labor		Travel in District Travel Out of Di		e
		The Instruction Guide explains how to o	omple	ete this form.				
1	Total pages Schedule F1:				3	Filer ID	(Ethics Commission Fi	lers)
	Sch: 3/16 Rpt: 17/31	Harris County Democratic Party (CEC)				00015507		
4	Date	5 Payee name						
	06/17/2024	Carriere, Kevin						
6	Amount (\$)	7 Payee address; City; State; Zip C	Code					
	\$419.26	4619 Lyons Ave						
		Ste A						
		Houston, TX 77020						
_	DUDD005		10.					
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description	outo	ide of Toyac Com	nplete Schedule T.	
	EXPENDITURE	Salaries/Wages/Contract Labor				, officeholder livin		
				Payroll - State			5 - p	
						•		
9	Complete ONLY if direct	Candidate/Officeholder name Office so	<u>l</u>			Office h	eld	
_	expenditure to benefit C/OI		, agrit				olu .	
	Date	Payee name						
	06/20/2024	Community of Faith						
	Amount (\$)	Payee address; City; State; Zip C	Code					
	\$1,000.00	1024 Pinehurst Dr						
		Houston, TX 77091						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description				
	OF EXPENDITURE	Contributions/Donations Made By		ш			nplete Schedule T.	
		Candidate/Officeholder/Political Committee		Charitable Co		, officeholder living	g expense	
				Chantable Co) I I U	iibulioii		
	Complete ONLY if direct	Candidate/Officeholder name Office so	ught			Office h	eld	
	expenditure to benefit C/O	1						
	Date	Payee name						
	06/10/2024	Green, Danielle						
	Amount (\$)	Payee address; City; State; Zip C	Code					
	\$209.57	4619 Lyons Ave						
	,	Ste A						
		Houston, TX 77020						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		:df T O	oulete Cobe dule T	
	EXPENDITURE	Salaries/Wages/Contract Labor				, officeholder livin	nplete Schedule T.	
				Payroll - State			g oxponed	
						,		
	Complete ONLY if direct	Candidate/Officeholder name Office so	llaht			Office h	eld	
	expenditure to benefit C/O		agni			Cilico II	U.U	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 4/16 Rpt: 18/31	2 FILER NAME Harris County Democratic Party (CEC) 3 Filer ID (Ethics Commission Filers) 00015507
4 Date 06/17/2024	5 Payee name Green, Danielle
6 Amount (\$) \$494.50	7 Payee address; City; State; Zip Code 4619 Lyons Ave Ste A Houston, TX 77020
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll - State Activity
9 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 06/10/2024	Payee name Greene, Diarius
Amount (\$) \$344.56	Payee address; City; State; Zip Code 4619 Lyons Ave Ste A Houston, TX 77020
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll - State Activity
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 06/17/2024	Payee name Greene, Diarius
Amount (\$) \$470.62	Payee address; City; State; Zip Code 4619 Lyons Ave Ste A Houston, TX 77020
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll - State Activity
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 5/16 Rpt: 19/31	Harris County Democratic Party (CEC) 00015507
4	Date	5 Payee name
	06/10/2024	Gusto
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,531.00	525 2nd St
		San Francisco, CA 94107
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Payroll Taxes - State Activity
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
5	expenditure to benefit C/O	
_	Data	<u> </u>
	Date	Payee name
	06/17/2024	Gusto
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,715.99	525 2nd St
		San Francisco, CA 94107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LAI LIIDITORE	Check if Austin, TX, officeholder living expense
		Payroll Taxes - State Activity
	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/24/2024	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.14	6055 South Fwy
		Houston, TX 77004
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Event Catering
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialitate to beliefit 6/01	<u>'</u>

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
-	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
_	Sch: 6/16 Rpt: 20/31	Harris County Democratic Party (CEC) 00015507
4	Date	5 Payee name
	06/13/2024	Harris County Democratic Party FED PAC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$6,373.12	4619 Lyons Ave Suite A
		Houston, TX 77020
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transfer Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Transfer to Fed for Allocable Amount
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/24/2024	Harris County Democratic Party FED PAC
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,206.00	4619 Lyons Ave
		Suite A
		Houston, TX 77020
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transfer Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Transfer to Fed for Allocable Amount
		Transfer to Fed for Amount
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/26/2024	Harris County Democratic Party FED PAC
	Amount (\$)	Payee address; City; State; Zip Code
	\$23,753.54	4619 Lyons Ave
		Suite A
		Houston, TX 77020
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transfer Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense Transfer to Fed for Allocable Amount
		Translet to Fed for Allocable Amount
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/16 Rpt: 21/31	Harris County Democratic Party (CEC) 00015507
4	Date	5 Payee name
	06/13/2024	Harris County Democratic Party FED PAC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$9,626.88	4619 Lyons Ave
		Suite A
		Houston, TX 77020
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transfer Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Levin Funds Transfer to Fed Account
		Ecviri unus mansier to rea /tecount
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/10/2024	Harris, Nzhada
	Amount (\$)	Payee address; City; State; Zip Code
	\$588.28	4619 Lyons Ave
		Ste A
		Houston, TX 77020
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payroll - State Activity
		Taylon State Heavy
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/10/2024	Harris, Nzhada
	Amount (\$)	Payee address; City; State; Zip Code
	\$428.28	4619 Lyons Ave
		Ste A
		Houston, TX 77020
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Payroll - State Activity
		1 ayron - State Activity
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
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)

	Credit Card F dyment		The Instruction Guide explains how to cor	mple	te this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 8/16 Rpt: 22/31		Harris County Democratic Party (CEC)		00015507
4	Date	5	Payee name		•
	06/17/2024		Harris, Nzhada		
6	Amount (\$)	7	Payee address; City; State; Zip Coo	de	
	\$346.61		4619 Lyons Ave		
			Ste A		
			Houston, TX 77020		
8	PURPOSE	(a	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE				Check if Austin, TX, officeholder living expense
					Payroll - State Activity
9	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office sou	aht	Office held
9	expenditure to benefit C/O		Candidate/Officeriolder frame Office Sout	ynı	Office field
	Date	Т	Paves name		
	06/17/2024		Payee name Hayward, Justin		
		┡	<u> </u>	al a	
	Amount (\$)		Payee address; City; State; Zip Coo	ue	
	\$211.18		4619 Lyons Ave		
			Ste A		
		L	Houston, TX 77020		
	PURPOSE OF	(a)	,	(b)	Description
	EXPENDITURE		Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
					Payroll - State Activity
	Complete ONLY if direct		Candidate/Officeholder name Office sout	ght	Office held
	expenditure to benefit C/Ol	Н			
	Date		Payee name		
	06/27/2024		J & N Enterprises		
	Amount (\$)	T	Payee address; City; State; Zip Coo	de	
	\$3,000.00		2519 Fairway Park Dr		
			Ste 302		
			Houston, TX 77092		
	PURPOSE	(a	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Printing Expense		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE				Check if Austin, TX, officeholder living expense
					Printing Expense
_	Complete ONLY if direct	_	Candidate/Officeholder name	abt	Office hold
	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Officeholder name Office sou	ynı	Office held
	•				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Conditate/Officeholder/Pol Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
⊢			
1	Total pages Schedule F1: Sch: 9/16 Rpt: 23/31	2 FILER NAME Harris County Democratic Party (CEC) 3 Filer ID (Ethics Commission Filers) 00015507	
ᆫ	Och. 3/10 Ttpt. 23/01		
4	Date	5 Payee name	
	06/18/2024	J & N Enterprises	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
ľ	\$5,987.50	2519 Fairway Park Dr	
	Ψ5,907.50		
		Ste 302	
		Houston, TX 77092	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Printing Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Printig	
Ļ	Complete ONLY if direct	Candidata/Officeholder name Office country Office hold	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L			
	Date	Payee name	
	06/17/2024	Johnson, Keilan	
H	Amount (\$)	Payee address; City; State; Zip Code	
	\$441.48	4619 Lyons Ave	
	Ψ-1τ0		
		Ste A	
		Houston, TX 77020	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Salaries/Wages/Contract Labor	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Payroll - State Activity	
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	1	
H	Doto	Development	_
	Date	Payee name	
	06/24/2024	Kroger	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$36.22	1938 W Gray St	
		Houston, TX 77019	
1	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taxes, Complete Schedule T	
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		1	
		Event Catering	
L			
1	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	1	
ı			

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Constilling Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/16 Rpt: 24/31	Harris County Democratic Party (CEC) 00015507
4	Date	5 Payee name
	06/17/2024	Luigi's Pizzeria
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$90.57	3700 Almeda Rd
		Housto, TX 77004
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Event Catering
Ļ	Commission ONLL V if disposit	Condidate/Office holds
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/10/2024	Mendoza, Jennifer
	Amount (\$)	Payee address; City; State; Zip Code
	\$468.02	4619 Lyons Ave
		Ste A
		Houston, TX 77020
	DUDDOCE	1
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Payroll - State Activity
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	1
	Date	Payee name
	06/17/2024	Mendoza, Jennifer
	Amount (\$)	Payee address; City; State; Zip Code
	\$572.02	4619 Lyons Ave
		Ste A
		Houston, TX 77020
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Payroll - State Activity
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experience to belieff 6/01	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1: Sch: 11/16 Rpt: 25/31	2 FILER NAME Harris County Democratic Party (CEC) 3 Filer ID (Ethics Commission Filers) 00015507
4	Date 06/10/2024	5 Payee name Olivares, Julissa
6	Amount (\$) \$478.19	7 Payee address; City; State; Zip Code 4619 Lyons Ave Ste A Houston, TX 77020
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll - State Activity
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 06/17/2024	Payee name Olivares, Julissa
	Amount (\$) \$348.41	Payee address; City; State; Zip Code 4619 Lyons Ave Ste A Houston, TX 77020
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll - State Activity
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 06/10/2024	Payee name Pierce, Rakeem
	Amount (\$) \$224.43	Payee address; City; State; Zip Code 4619 Lyons Ave Ste A Houston, TX 77020
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll - State Activity
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
-	Sch: 12/16 Rpt: 26/31	Harris County Democratic Party (CEC) 00015507
4	Date	5 Payee name
	06/17/2024	Pierce, Rakeem
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$902.28	4619 Lyons Ave
		Ste A
		Houston, TX 77020
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Payroll - State Activity
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/10/2024	Rivera, Griselda
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,004.65	4619 Lyons Ave
		Ste A
		Houston, TX 77020
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Payroll - State Activity
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/17/2024	Rivera, Griselda
	Amount (\$)	Payee address; City; State; Zip Code
	\$628.54	4619 Lyons Ave
		Ste A
		Houston, TX 77020
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Payroll - State Activity
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Wangs/Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 13/16 Rpt: 27/31	Harris County Democratic Party (CEC) 00015507					
4	Date	5 Payee name					
	06/25/2024	Sam's Club					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$129.77	1615 S Loop W					
		Houston, TX 77054					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense Event Catering					
		Event Swering					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
ľ	expenditure to benefit C/O						
F	Date	Payee name					
	06/26/2024	Scale to Win LLC					
H	Amount (\$)	Payee address; City; State; Zip Code					
\$2,500.00 13742 Harper St							
	+ -,						
		Santa Ana, CA 92703					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE		Consulting Expense Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense Transfer to Fed for Allocable Amount					
		Transfer to Fourier Amount					
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OH						
H	Date	Payee name					
	06/10/2024	Thruman, Jeffery					
H	Amount (\$)	Payee address; City; State; Zip Code					
	\$718.78	4619 Lyons Ave					
		Ste A					
		Houston, TX 77020					
L	PURPOSE	To.					
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITURE	Check if Austin, TX, officeholder living expense					
		Payroll - State Activity					
L							
Complete ONLY if direct Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OH						
1							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Cor Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)				
		The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 14/16 Rpt: 28/31	Harris County Democratic Party (CEC) 00015507				
4	Date	5 Payee name				
	06/17/2024	Thruman, Jeffery				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$734.79	4619 Lyons Ave				
		Ste A				
		Houston, TX 77020				
_	DUDDOCE		_			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Salaries/Wages/Contract Labor				
		Payroll - State Activity				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_			
	expenditure to benefit C/OI	1				
	Date	Payee name	_			
	06/10/2024	Torres, Angelica				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$643.83	4619 Lyons Ave				
		Ste A				
		Houston, TX 77020				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_			
	OF EXPENDITURE	Salaries/Wages/Contract Labor				
	EXPENDITORE	Check if Austin, TX, officeholder living expense				
		Payroll - State Activity				
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
	D-4-		_			
	Date	Payee name				
	06/17/2024	Torres, Angelica				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$660.34	4619 Lyons Ave				
		Ste A				
		Houston, TX 77020				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Salaries/Wages/Contract Labor				
	LAI LINDITORL	Check if Austin, TX, officeholder living expense				
		Payroll - State Activity				
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
	- p					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solarios (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (output a category not listed above)

	Credit Card Payment	Credit Card Payment The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 15/16 Rpt: 29/31	Harris County Democratic Party (CEC) 00015507					
4	Date	5 Payee name					
	06/10/2024	Trimiar, Kaisa					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$470.68	4619 Lyons Ave					
		Ste A					
		Houston, TX 77020					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Salaries/Wages/Contract Labor					
		Check if Austin, TX, officeholder living expense Payroll - State Activity					
		Payroll - State Activity					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
5	expenditure to benefit C/O						
_	Date	Payee name					
	06/17/2024	Trimiar, Kaisa					
		· ·					
Amount (\$)							
\$305.06		4619 Lyons Ave					
		Ste A					
		Houston, TX 77020					
PURPOSE OF		(a) Category (See Categories listed at the top of this schedule) (b) Description					
EXPENDITURE		Salaries/Wages/Contract Labor					
		Payroll - State Activity					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O	H ·					
	Date	Payee name					
	06/17/2024	Usuanele, Osatohamwen					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$69.26	4619 Lyons Ave					
		Ste A					
		Houston, TX 77020					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF	Salaries/Wages/Contract Labor Chy Society (See Categories listed at the top of this schedule) Chy Society (See Categories listed at the top of this schedule) Chy Society (See Categories listed at the top of this schedule) Chy Society (See Categories listed at the top of this schedule) Chy Society (See Categories listed at the top of this schedule)					
	EXPENDITURE	Check if Austin, TX, officeholder living expense					
		Payroll - State Activity					
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			ravel Out of District OTHER (enter a category not listed above) lete this form.				
1	Total pages Schedule F1: Sch: 16/16 Rpt: 30/31	Harris County Democratic Party (CEC)			3 Filer ID (Ethics Commission Filers) 00015507			
4	Date 06/10/2024	5 Payee name White, Deandre						
6	Amount (\$) \$390.73	7 Payee address; City; State; Zip Code 4619 Lyons Ave Ste A Houston, TX 77020						
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedul Salaries/Wages/Contract Labor	ule)	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll - State Activity			
9	Complete ONLY if direct expenditure to benefit C/Oh		andidate/Officeholder name Offic	ice soug	ht	Office held		
	Date 06/17/2024	ı	Payee name White, Deandre					
	Amount (\$) \$518.38		Payee address; City; State; Z 4619 Lyons Ave Ste A Houston, TX 77020	Zip Cod	de			
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedul Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll - State Activity				
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH								

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 31/31 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Harris County Democratic Party (CEC) 00015507 8 Amount (\$) Date 5 Name of person from whom amount is received 06/26/2024 \$13.50 Harris County Democratic Party FED PAC 6 Address of person from whom amount is received; City; State; Zip Code Houston, TX 77020 Purpose for which amount is received Check if political contribution returned to filer Transfer Return