#### FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00069740 19 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Chad E. NAME Date Received **ELECTRONICALLY FILED** 07/12/2025 NICKNAME LAST **SUFFIX** Bridges CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. **Emily** NAME NICKNAME LAST **SUFFIX** Hillsman **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 560-2452 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Day Month Day Year Year **COVERED THROUGH** 01/01/2025 06/30/2025 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE Court Of Appeals, Justice Place 3 District 14

## JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM JC/OH COVER SHEET PG 2

2 of 19

13 C / OH NAME	Bridges, Chad E. (The	e Honorable)	<b>14</b> Filer ID 00069740	(Ethics Comn	nission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without I officeholders are required to report this information	the candidate's or offic	eholder's kno	wledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS		
<b>16</b> CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS(OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00
		CAL CONTRIBUTIONS		\$	18,367.70
EXPENDITURE	,	PLEDGES, LOANS, OR GUARANTEES OF LOAN ZED POLITICAL EXPENDITURES	IS)		
TOTALS	3. TOTAL ONTEM	ZED FOLITICAL EXPENDITORES		\$	0.00
	4. TOTAL POLIT	CAL EXPENDITURES		\$	23,487.96
CONTRIBUTION BALANCE	5. TOTAL POLITICATION REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$	3,561.67
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	0.00
<b>17</b> AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.			
		The Hono	orable Chad E. Bridg	ies	
		Signature o	f Candidate or Officeho	older	
AFFIX NO	TARY STAMP / SEAL ABO	DVE			
Sworn to and subsc	cribed before me, by the s	aid	, this the		_ day
of	, 20, to ce	ertify which, witness my hand and seal of office.			
Signature of office	cer administering oath	Printed name of officer administering oath	Title of office	er administerin	ig oath

### **SUBTOTALS - JC/OH**

## FORM JC/OH COVER SHEET PG 3

				3 of 19
18 FILER N		19 Filer ID	(Ethics	Commission Filers)
Bridges,	Chad E. (The Honorable)	00069740		
	LE SUBTOTALS = SCHEDULE	s	UBTOTAL AMOUNT	
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	17,350.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	1,017.70
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	23,487.96
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH			\$	
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS			\$	
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1 Total pages Schedule A(J)1: Sch: 1/6 Rpt: 4/19
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Bridges, Cha	ad E. (The Honorable)			00069740
4	Date 01/02/2025	<ul><li>Full name of contributor Abrams, Barry</li><li>Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7 Amount of Contribution (\$) \$500.00
		Houston, TX 77002			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
	Attorney			Attorney	
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)
	Blank Rome			N/A	
12	! If contributor i	s a child, law firm of parent(s) (i	f any)		
	Date	Full name of contributor	out-of-state PAC (ID#:		Amount of Contribution (\$)
	03/04/2025	Aziz, Mohammed	_		\$5,000.00
		Contributor address; City; State; Zip Code			··· <mark> </mark>
		Houston, TX 77002			
		Principal Occupation		Contributor's Job Title	
	Attorney			Partner	
		employer/law firm		Law firm of contributor's s	pouse (if any)
		atkins Nichols Agosto Aziz &		N/A	
	If contributor i	s a child, law firm of parent(s) (i	f any)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	03/04/2025	Barrow, Hunter			\$500.00
		Contributor address; City;	State; Zip Code		
		Housron, TX 77056			
	Contributor's	Principal Occupation		Contributor's Job Title	•
	Attorney			Attorney	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Andrews Me	eyers, PC		N/A	
	If contributor i	s a child, law firm of parent(s) (i	f any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains h	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 2/6 Rpt: 5/19
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Bridges, Ch	ad E. (The Honorable)			00069740
4	Date	5 Full name of contributor out-of-state PAC (ID#:) 5 Bender, Andrew			7 Amount of Contribution (\$)
	01/28/2025				\$500.00
		6 Contributor address; City	State; Zip Code		
		Houston, TX 77056			
8	Contributor's	I Principal Occupation		9 Contributor's Job Title	<u> </u>
	Attorney			Partner	
10		employer/law firm		11 Law firm of contributor's s	pouse (if any)
	Andrews Me	• •		N/A	, , , , , , , , , , , , , , , , , , , ,
12		is a child, law firm of parent(s) (	if any)	1	
-	Date	Full name of contributor	out-of-state PAC (ID#:	,	Amount of Contribution (\$)
	02/02/2025	Dick, Eric	Uni-oi-state PAC (ID#.	J	\$500.00
	02/02/2020		State: Zin Code		
		Contributor address; City:	State, Zip Code		
		Hereton TV 77000			
		Houston, TX 77092		T =	
		Principal Occupation		Contributor's Job Title	
	Attorney			Attorney	
		employer/law firm		Law firm of contributor's s	pouse (if any)
	Dick Law Fi			Dick Law Firm	
	If contributor i	is a child, law firm of parent(s) (	if any)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	01/08/2025	Dobroski, Paul			\$250.00
		Contributor address; City	State; Zip Code		"
		Houston, TX 77007			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Attorney			Partner	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Dobrowski S	Stafford Pierce, LLP		N/A	
	If contributor i	is a child, law firm of parent(s) (	if any)	ı	

	MONET	ARY POLITICAL CONTRIBUTI	SCHEDULE A(J)1		
	The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A(J)1: Sch: 3/6 Rpt: 6/19	
2	FILER NAME			3 Filer ID (Ethics Commission Filers)	
	Bridges, Cha	ad E. (The Honorable)		00069740	
4	Date 01/23/2025	5 Full name of contributor out-of-state PAC (ID#:) Fogler, Murray  6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$500.00	
		Houston, TX 77010			
8	Contributor's	Principal Occupation	9 Contributor's Job Title		
	Attorney		Partner		
10		employer/law firm	11 Law firm of contributor's s	spouse (if any)	
		O'Neil and Gray LLP	N/A		
12	If contributor i	s a child, law firm of parent(s) (if any)			
	Date	Full name of contributor out-of-state PAC (ID:	#: )	Amount of Contribution (\$)	
	01/28/2025	Gray, Michelle		\$100.00	
		Contributor address; City; State; Zip Code		··· <b> </b>	
		, sometimes and state of the st			
		Houston, TX 77010			
-	Contributor's	Principal Occupation	Contributor's Job Title		
	Attorney	o.pa. Godapa.c.	Partner		
		employer/law firm	Law firm of contributor's s	snouse (if any)	
		O'Neil and Gray LLP	N/A	(i. a. j)	
		s a child, law firm of parent(s) (if any)	·		
	commodici	2 a 3a, a 5. pa 5(c) ( a),			
	Date	Full name of contributor	#:)	Amount of Contribution (\$)	
	01/20/2025	Hagans, William		\$250.00	
		Contributor address; City; State; Zip Code		··· <mark> </mark>	
		Houston, TX 77002			
	Contributor's	Principal Occupation	Contributor's Job Title		
	Attorney		Attorney		
	Contributor's	employer/law firm	Law firm of contributor's s	spouse (if any)	
	Hagans Law	<i>ı</i> Firm	N/A		
	If contributor i	s a child, law firm of parent(s) (if any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 4/6 Rpt: 7/19
2	FILER NAME Bridges, Cha	ad E. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069740
4	4 Date 01/27/2025		7	Amount of Contribution (\$) \$2,500.00		
		Houston, TX 77002		_		
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
01/29/2025 Mithoff, Richard  Contributor address; City; State; Zip Code			\$1,500.00			
		Houston, TX 77002				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Mithoff Law			N/A		
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)
	01/08/2025	Nichols, Taylor	_			\$250.00
Contributor address; City; State; Zip Code						
	Contributor's I	Houston, TX 77002 Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney	этпстрат Оссирацоп		Attorney		
_		employer/law firm		Law firm of contributor's sp	חחוים	se (if any)
		epo & Harvin & Robbins, LL	P	N/A	Jour	se (ii diiy)
		s a child, law firm of parent(s) (i				

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A	A(J)1	
	The Instru	he Instruction Guide explains how to complete this form.			1		ges Schedule A(J)1 6 Rpt: 8/19	:
2	FILER NAME Bridges, Cha	ad E. (The Honorable)			3	Filer ID 0006974	(Ethics Commissio	on Filers)
4	Date 02/28/2025			7	Amount o	of Contribution (\$)	\$500.00	
		Houston, TX 77010		<del>,</del>				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title				
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	ous	se (if any)		
12	12 If contributor is a child, law firm of parent(s) (if any)							
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Τ	Amount o	of Contribution (\$)	
	02/28/2025 Reynolds and Frizzel  Contributor address; City; State; Zip Code					\$1,000.00		
		Houston, TX 77002			L			
	Contributor's F	Principal Occupation		Contributor's Job Title				
	Contributor's 6	employer/law firm		Law firm of contributor's sp	ous	se (if any)		
	If contributor is	s a child, law firm of parent(s) (if a	.ny)					
	Date	Full name of contributor	out-of-state PAC (ID#:_		Ī	Amount o	of Contribution (\$)	
	02/24/2025	Wright Close & Barger LLF	P					\$1,500.00
		Contributor address; City; Sta	ate; Zip Code		·			
	Contributor's F	Principal Occupation		Contributor's Job Title				
Contributor's employer/law firm Law			Law firm of contributor's sp	ous	se (if any)			
	If contributor is	s a child, law firm of parent(s) (if a	ıny)					

MONE	TARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
The Instr	uction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 6/6 Rpt: 9/19	
2 FILER NAM			3 Filer ID (Ethics Commission Filers)
	nad E. (The Honorable)		00069740
4 Date	5 Full name of contributor out-of-state PAC (ID#	t:)	7 Amount of Contribution (\$)
01/13/2025			\$2,000.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77002		
8 Contributor's	s Principal Occupation	9 Contributor's Job Title	
10 Contributor's	s employer/law firm	11 Law firm of contributor's s	pouse (if any)

### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 10/19 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Bridges, Chad E. (The Honorable) 00069740 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 01/28/2025 Haynes and Boone \$1,017.70 Food and drinks for 7 Contributor address; City; State; Zip Code fundraiser Dallas, TX 75201 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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: 1/9 Rpt: 11/19	Bridges, Chad E. (The Honorable) 00069740
4	Date	5 Payee name
	03/07/2025	Bridges, Chad
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,950.00	1103 Magnolia Woods
		Sugar Land, TX 77479
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Loan Repayment/Reimbursement
		Check if Austin, TX, officeholder living expense  Loan repayment to myself
		Louit repayment to mysen
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	_	
	Date	Payee name
	01/30/2025	Bridges, Chad
	Amount (\$)	Payee address; City; State; Zip Code
	\$11,000.00	1103 Magnolia Woods
		Sugar Land, TX 77479
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Loan reimbursement to myself
		Loan formation to myour
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	01/30/2025	Bridges, Chad
		-
	Amount (\$)	Payee address; City; State; Zip Code
	\$850.75	1103 Magnolia Woods
		Sugar Land, TX 77479
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Reimbursement for personal funds used for Federal
		Grill Fundraiser documented on last report.
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### 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 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 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: 2/9 Rpt: 12/19	Bridges, Chad E. (The Honorable) 00069740
4	Date	5 Payee name
	03/07/2025	Colon & Company
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,250.00	7941Katy Freeway #108
		Houston, TX 77024
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Consulting fees
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/14/2025	Deborah Young - Clerk of the Court
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	301 Fannin
		Houston, TX 77002
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
		Check if Austin, TX, officeholder living expense  Court Cheer fund, for activities that support interns,
		staff attorneys made only b/c of candidacy.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	01/28/2025	Expose Excellence Youth Program Foundation
	Amount (\$) \$150.00	Payee address; City; State; Zip Code  4203 Glade Shadow Ct
	\$150.00	4203 Glade Stiadow Ct
		Katy, TX 77494
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Donation for Black History Month sponsorship
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1 Total marian Calcadula F1.	· · · · · · · · · · · · · · · · · · ·		2 Files ID (Ethica Commission Filese)	
1 Total pages Schedule F1: Sch: 3/9 Rpt: 13/19	Bridges, Chad E. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00069740	
4 Date	5 Payee name			
03/06/2025	Fort Bend County Republican Party			
6 Amount (\$) \$175.00	7 Payee address; City; State PO Box 461 Sugar Land, TX 77487	; Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sci Event Expense	Check if travel	outside of Texas. Complete Schedule T. , TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Office sought	Office held	
Date	Payee name			
01/20/2025	MOGHADDAM, Alex			
Amount (\$)	Payee address; City; State	; Zip Code		
\$846.24	3730 Washington Ave			
	Houston, TX 77007			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sci Event Expense	Check if travel	outside of Texas. Complete Schedule T. , TX, officeholder living expense nvestiture	
Complete ONLY if direct expenditure to benefit C/OI		Office sought	Office held	
Date	Payee name			
03/05/2025	Paypal			
Amount (\$) \$174.99	Payee address; City; State 2211 N. 1st Street	; Zip Code		
	San Jose, CA 95131			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sci Accounting/Banking	Check if travel	outside of Texas. Complete Schedule T. , TX, officeholder living expense oution processing fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Office sought	Office held	

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 4/9 Rpt: 14/19	
4	Date	5 Payee name
	02/18/2025	Paypal
6	Amount (\$) \$38.72	7 Payee address; City; State; Zip Code 2211 N. 1st Street
		San Jose, CA 95131
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Online contribution processing fee
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/03/2025	Texas Center for the Judiciary
	Amount (\$) \$4,300.00	Payee address; City; State; Zip Code 1210 San Antonio Suite 800
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if the relevant of Taylor Camplete Schedule T
	EXPENDITURE	Donation Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Donation to Texas Center for the Judiciary. Initially sent, returned and replaced. 5/8-5/22
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/06/2025	Wix
	Amount (\$) \$167.37	Payee address; City; State; Zip Code 500 Terry A Francois Blvd
		San Francisco, CA 94158
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Website fee
	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 Event Expense Fees

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		nmittee	Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.				Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	ı								Filer ID	(Ethics Commission	Filers)
L	Sch: 5/9 Rpt: 15/19	$\bigsqcup$	Bridges, Ch	ad E. (The Hono	orable)					00069740		
4	Date	5	Payee name									
	02/27/2025	'	Wix									
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$35.39		500 Terry A	Francois Blvd								
			San Francis	co, CA 94158								
8	PURPOSE	(a)	Category (Se	e Categories listed at the	e top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Advertising					므			plete Schedule T.	
								Check if Austin, Website fee	, TX,	officeholder living	g expense	
								VVCD3IC ICC				
9	Complete ONLY if direct		andidate/Offic	ceholder name	0	Office sou	aht			Office he	eld	
Ĺ	expenditure to benefit C/Oh		andidate/Office	Jeriolder Hame			y II			- Cilico III		
	Date		Payee name									
	03/03/2025	'	Wix									
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$18.80		500 Terry A	Francois Blvd								
			San Francis	co, CA 94158								
	PURPOSE	(a)	Category (Se	e Categories listed at the	e top of this sche	edule)	(b)	Description				
OF EXPENDITURE			Accounting/					ш			plete Schedule T.	
LAFLINDITURE								Check if Austin, TX, officeholder living expense  Online contribution processing fee				
								Online contrit	JU[[	on processi	ng lee	
_	Complete ONLY if direct		andidate/Offi	ceholder name		Office sou	aht			Office he	ald	
	expenditure to benefit C/O		anulale/OIII	ocholuel Hallle	C	mue suu	yııl			Onice H	Jiu	
$\vdash$	Data	_	Davies :									
	Date 01/29/2025	l	Payee name Wix									
				Ole III		7: 0	- ام					
	Amount (\$)		Payee addres		State;	Zip Co	ae					
	\$3.20		oud Terry A	Francois Blvd								
			San Francis	co, CA 94158								
	PURPOSE	(a)	Category (Se	e Categories listed at the	e top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Accounting/			•		_			plete Schedule T.	
								Check if Austin, Online contrib		officeholder living		
								Offilial Contrib	JUIII	on processi	iig iee	
	Complete ONLY if direct	$\overline{\Gamma}$	andidato/Offic	ceholder name		Office sou	aht			Office he	ald	
	expenditure to benefit C/O		anulale/OIII	choluel hallle	C	mue suu	yııl			Onice He	Jiu	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 6/9 Rpt: 16/19	Bridges, Chad E. (The Honorable) 00069740
4	Date	5 Payee name
	01/28/2025	Wix
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$18.80	500 Terry A Francois Blvd
		San Francisco, CA 94158
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Online contribution processing fee
		Offiline contribution processing fee
_	0 1: 0 11 1 1	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/23/2025	Wix
	Amount (\$)	Payee address; City; State; Zip Code
	\$14.80	500 Terry A Francois Blvd
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Online contribution processing fee
_	Operation ONLY if allowed	Our did to 10 ff as had done as many
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	•	
	Date	Payee name
	01/20/2025	Wix
	Amount (\$)	Payee address; City; State; Zip Code
	\$7.55	500 Terry A Francois Blvd
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	ZA ZADITORZ	Check if Austin, TX, officeholder living expense
		Online contribution processing fee
	0 1. 0	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	onponditure to belieff 6/01	•

#### 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 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 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: 7/9 Rpt: 17/19	Bridges, Chad E. (The Honorable) 00069740
4	Date	5 Payee name
	01/13/2025	Wix
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$58.30	500 Terry A Francois Blvd
		San Francisco, CA 94158
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	_/	Check if Austin, TX, officeholder living expense Online contribution processing fee
		Offline contribution processing ree
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davisa nama
	01/08/2025	Payee name Wix
		Payee address; City; State; Zip Code
	Amount (\$) \$9.55	500 Terry A Francois Blvd
	φ9.55	300 Terry A Francois Bivu
		San Francisco CA 04150
		San Francisco, CA 94158
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Online contribution processing fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	01/08/2025	Wix
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.55	500 Terry A Francois Blvd
		San Francisco, CA 94158
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	_/	Check if Austin, TX, officeholder living expense Online contribution processing fee
		Offline contribution processing ree
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### 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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 8/9 Rpt: 18/19	Bridges, Chad E. (The Honorable) 00069740
4	Date	5 Payee name
	01/02/2025	Wix
6	Amount (\$) \$18.80	7 Payee address; City; State; Zip Code 500 Terry A Francois Blvd
		San Francisco, CA 94158
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Online contribution processing fee
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/27/2025	Wix
	Amount (\$) \$35.39	Payee address; City; State; Zip Code 500 Terry A Francois Blvd
		San Francisco, CA 94158
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Website Fee
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/27/2025	Wix
	Amount (\$) \$220.83	Payee address; City; State; Zip Code 500 Terry A Francois Blvd
		San Francisco, CA 94158
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Website Fee
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		mmittee	Legal Services Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.				OTHER (enter a category not listed above)				
		_		The Instruction Guid	te explains now to co	ompi	ete this form.					
1	Total pages Schedule F1:	2	FILER NAME					ı	Filer ID	(Ethics Commission Filers)		
	Sch: 9/9 Rpt: 19/19		Bridges, Cha	ad E. (The Honor	able)				00069740			
4	Date	5	Payee name									
	01/14/2025		Wix									
6	Amount (\$)	7	Payee addres	s; City;	State; Zip C	ode						
	\$12.99		500 Terry A	Francois Blvd								
			San Francis	co, CA 94158								
8	PURPOSE	(a)	Category (Se	e Categories listed at the	top of this schedule)	(b)	Description					
	OF EXPENDITURE	Advertising Expense					Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITORE						<b>—</b>	, TX,	officeholder living	g expense		
							Website fee					
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	eholder name	Office so	ught			Office h	eld		
	experiantiale to belief crof											
	Date		Payee name									
	01/14/2025		Wix									
	Amount (\$)		Payee addres	s; City;	State; Zip C	ode						
	\$20.94		500 Terry A	Francois Blvd								
			San Francis	co, CA 94158								
	PURPOSE	(a)	Category (Se	e Categories listed at the	top of this schedule)	(b)	Description					
	OF EXPENDITURE		Advertising I	Expense			ш			nplete Schedule T.		
							Check if Austin, Website fee	, TX,	officeholder living	g expense		
							website iee					
	Complete ONLY if direct	<u> </u>	Candidate/Offic	eholder name	Office so	ıaht			Office h	eld		
	expenditure to benefit C/Ol		zarialaate/Offic	cholder hame	Office 300	agrit			Office fi	ciu		
$\vdash$												