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) 00081906 11 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Joshua T. NAME Date Received **ELECTRONICALLY FILED** 07/15/2025 NICKNAME LAST **SUFFIX** Burgess CANDIDATE / Date Hand-delivered or Date Postmarked ADDRESS / PO BOX; APT / SUITE #; 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** Mr. Ralph H NAME NICKNAME LAST **SUFFIX** Duggins **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** (303) 656-6869 **PHONE** REPORT TYPE January 15 30th day before election 15th day after campaign treasurer 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 District Judge District 352

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 11

13 C / OH NAME	Burgess, Joshua T.	The Honorable)		14 Filer ID 00081906	(Ethics Com	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepte These expenditures may have I officeholders are required to	ve been made without tl	he candidate's or offic	ceholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
Ш	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN T	FREASURER NAME			
		COMMITTEE CAMPAIGN T	FREASURER ADDRES	S		
16 CONTRIBUTION	1 TOTAL INITEM	ZED DOLUTICAL CONTRIBU	ITIONS/OTUED TUAN	DIEDOES LOANS		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBL ES OF LOANS, OR CONTRI			\$	0.00
		ICAL CONTRIBUTIONS PLEDGES LOANS OR GUA	ARANTEES OF LOANS	3)	\$	0.00
EXPENDITURE TOTALS					\$	0.00
	4. TOTAL POLIT	ICAL EXPENDITURES			\$	3,420.24
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTRIOD	TAINED AS OF THE LA	AST DAY OF THE	\$	21,523.30
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTS TING PERIOD	TANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT						
		true and	or affirm, under penalty correct and includes all tle 15, Election Code.			
			The Honora	ble Joshua T. Bur	gess	
			Signature of	Candidate or Officeh	older	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
		aid		, this the		day
of	, 20, to co	ertify which, witness my hand	l and seal of office.			
Signature of office	cer administering oath	Printed name of officer	administering oath	Title of offic	er administer	ing oath
-	•		Ç			-

SUBTOTALS - JC/OH

FORM **JC/OH** COVER SHEET PG 3

	3 of 11								
l	ER NAN	ME Joshua T. (The Honorable)	19 Filer ID 00081906	(Ethics Commission Filers)					
I	HEDULI ME OF	SUBTOTAL AMOUNT							
1.		SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$						
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$						
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$					
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$					
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 1,760.12					
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.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 1,660.12					
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$					
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$					
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$					

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: 1/4 Rpt: 4/11	Burgess, Joshua T. (The Honorable) 00081906
4	Date	5 Payee name
	02/06/2025	Burgess, Josh (The Honorable)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$330.00	PO Box 101931
		Fort Worth, TX 76185
8	PURPOSE	
Ü	OF	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Reimbursement for Schedule G Expenses
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiorare to berieff C/O	
	Date	Payee name
	02/06/2025	Burgess, Josh (The Honorable)
	Amount (\$)	Payee address; City; State; Zip Code
	\$210.00	PO Box 101931
		Fort Worth, TX 76185
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Reimbursement for Schedule G Expenses
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	U
	D :	
	Date 02/27/2025	Payee name
		Burgess, Josh (The Honorable)
	Amount (\$)	Payee address; City; State; Zip Code
	\$120.00	PO Box 101931
		Fort Worth, TX 76185
	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
		Reimbursement for Schedule G Expenses
		Trainibalisation is a Expenses
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 co	mplete this for	m.	
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 2/4 Rpt: 5/11	Burgess, Joshua T. (The Honorable)		00081906	
4 Date	5 Payee name			
03/06/2025	Burgess, Josh (The Honorable)			
6 Amount (\$)	7 Payee address; City; State; Zip Co	de		
\$134.90	PO Box 101931			
	Fort Worth, TX 76185			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	nn	
OF	Loan Repayment/Reimbursement		f travel outside of Texas. Com	plete Schedule T.
EXPENDITURE			f Austin, TX, officeholder living	
		Reimbu	rsement for Schedul	e G Expenses
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght	Office he	eld
experiulture to belieff C/O	¬			
Date	Payee name			
03/21/2025	Burgess, Josh (The Honorable)			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$289.00	PO Box 101931			
	Fort Worth, TX 76185			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	on	
OF EXPENDITURE	Loan Repayment/Reimbursement		f travel outside of Texas. Com	plete Schedule T.
EXPENDITORE			f Austin, TX, officeholder living	
		Reimbui	rsement for Schedul	e G Expenses
Complete ONLY if direct	Condidate/Officeholder page		Office le	al al
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	gnı	Office he	eiu
·				
Date	Payee name			
04/23/2025	Burgess, Josh (The Honorable)			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$263.00	PO Box 101931			
	Fort Worth, TX 76185			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	on	
OF EXPENDITURE	Loan Repayment/Reimbursement		f travel outside of Texas. Com	
		ш	f Austin, TX, officeholder living rsement for Schedul	
		reπinnα!	isement ioi schedul	e o exhelises
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office he	ald
Complete <u>ONLY</u> if direct expenditure to benefit C/O		ynt	Office ne	สน
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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 Lenal 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 (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·						
	Sch: 3/4 Rpt: 6/11	Burgess, Joshua T. (The Honorable) 00081906						
4	Date	5 Payee name						
	05/05/2025	Burgess, Josh (The Honorable)						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$75.87	PO Box 101931						
		Fort Worth, TX 76185						
8	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						
		Reimbursement for Schedule G Expenses						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O							
_	Date	Payee name						
	05/05/2025	Burgess, Josh (The Honorable)						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$76.41	PO Box 101931						
	410.12	1 6 56% 101501						
		Fort Worth, TX 76185						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		Reimbursement for Schedule G Expenses						
		Troimbarcoment for conteaution of Experience						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI							
-	Date	Payee name						
	06/02/2025	Burgess, Josh (The Honorable)						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$15.13	PO Box 101931						
	Ψ13.13	10 80% 101301						
		Fort Worth, TX 76185						
	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 Reimbursement for Schedule G Expenses						
		Reinibulsement for Schedule & Expenses						
	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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expense Printing E Legal Services Salaries/ The Instruction Guide explains how to co	Wages	s/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID	(Ethics Commission Filers)
	Sch: 4/4 Rpt: 7/11		Burgess, Joshua T. (The Honorable)				00081906	
4	Date	5	Payee name		'			
	06/02/2025		Burgess, Josh (The Honorable)					
6	Amount (\$)	7	Payee address; City; State; Zip Co	ode				
	\$145.81		PO Box 101931					
			Fort Worth, TX 76185					
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE		Loan Repayment/Reimbursement					plete Schedule T.
					ш		officeholder living	e G Expenses
					rtombaroome	,,,,	ioi concaai	o o Exponedo
9	Complete ONLY if direct		andidate/Officeholder name Office sou	ıght			Office he	eld
	expenditure to benefit C/OI	Н						
	Date		Payee name					
	01/14/2025		Tarrant County Republican Assembly					
	Amount (\$)		Payee address; City; State; Zip Co	ode				
	\$100.00		101536 Locksley Dr.					
			Benbrook, TX 76126					
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE		Fees		ш			plete Schedule T.
					Membership [officeholder living	g expense
	Complete ONLY if direct		andidate/Officeholder name Office sou	<u>l</u> ught	·		Office he	eld
	expenditure to benefit C/OI	H						

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense

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			Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E: Salaries/V	xpense Vages/Contract Labor	-	Fravel in District Fravel Out of District	gory not listed above)	
	oroan oara'i aymone		The Instruction Guide explains	how to co	omplete this form.				
1	Total pages Schedule G:	2 FILER NAM	E			3 F	Filer ID (Ethic	s Commission Filers)	
	Sch: 1/4 Rpt: 8/11	Burgess, J	oshua T. (The Honorable)		(00081906			
4	Date	5 Payee name	5 Payee name						
	05/07/2025	Del Frisco'	s Grille						
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$76.41	154 E 3rd	St						
	Reimbursement from								
	X political contributions intended	Fort Worth	, TX 76102						
8	PURPOSE	(a) Category (See Categories listed at the top of this sch	nedule)	(b) Description	Che	ck if travel outside of	Texas. Complete Schedule T.	
	OF EXPENDITURE	Food/Beve	erage Expense	ļ		Che	ck if Austin, TX, office	eholder living expense	
	EXPENDITORE			ļ	Lunch with suppo	orter			
				ļ					
9		Candidate/Office	eholder name		Office sought		Office	e held	
	expenditure to benefit C/OH								
	Date	Payee name)						
	05/05/2025	Gloria's							
	Amount (\$)		; Zip Co	ode					
	\$75.87	7 2600 W 7th St #175							
	Reimbursement from political contributions								
	intended	Fort Worth	, TX 76107						
	PURPOSE	Category (See Categories listed at the top of this sch	nedule)	Description			Texas. Complete Schedule T.	
	OF EXPENDITURE	Food/Beve	erage Expense		<u> </u>	Che	ck if Austin, TX, office	eholder living expense	
					Office Lunch				
_									
	Complete ONLY if direct expenditure to benefit	Candidate/Office	eholder name		Office sought		Office	e held	
	C/OH								
	Date	Payee name	9						
	06/02/2025	Pappasito'							
_	Amount (\$)	Payee addre		; Zip Co	nde				
	\$145.81	1 1	•	, _,					
	Reimbursement from		,						
	political contributions intended	Fort Worth	, TX 76105						
	PURPOSE	Category (See Categories listed at the top of this sch	iedule)	Description	=		Texas. Complete Schedule T.	
	OF EXPENDITURE	Food/Beve	erage Expense	ļ	-	X Che	ck if Austin, TX, office	eholder living expense	
				ļ	Office Luncheon				
		<u> </u>							
	Complete ONLY if direct expenditure to benefit	Candidate/Office	eholder name		Office sought		Office	e held	
	C/OH								

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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/Politica Credit Card Payment	/ Donations Made By - Gift/Awards/Memorials Expense Printing Expense //Officeholder/Political Committee Legal Services Salaries/Wages/Contra		kpense /ages/Contract Labor		District It of District enter a category not listed above)	
1	Total pages Schedule G:	2 FILER NAME				3 Filer ID	(Ethics Commission Filers)
	Sch: 2/4 Rpt: 9/11	Burgess, Joshua	a T. (The Honorable)			00081	906
4	Date	5 Payee name					
	02/06/2025	RightSide Comp	liance, LLC				
6	Amount (\$)	7 Payee address;	City; State;	Zip Co	de		
	\$330.00	PO Box 341027					
	Reimbursement from political contributions intended	Austin, TX 7873	4				
8	PURPOSE	(a) Category (See Cate	egories listed at the top of this sche	edule)	(b) Description	Check if trav	el outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Consulting Expe	nse			Check if Aus	tin, TX, officeholder living expense
					Compliance Con	sulting	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholde	r name		Office sought		Office held
	Date	Payee name					
	03/21/2025	Squarespace					
	Amount (\$)	Payee address;	City; State;	Zip Co	de		
	\$289.00	8 Clarkson St					
	Reimbursement from						
	x political contributions intended	New York, NY 1	0014				
	PURPOSE	Category (See Cate	egories listed at the top of this sche	edule)	Description	Check if trav	el outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Office Overhead	/Rental Expense			Check if Aus	tin, TX, officeholder living expense
					Web Domain		
	Complete ONLY if direct expenditure to benefit	Candidate/Officeholde	r name		Office sought		Office held
	C/OH						
	Date	Payee name					
	04/23/2025	State Bar of Tex	as				
	Amount (\$)	Payee address;	City; State;	Zip Co	de		
	\$263.00	1414 Colorado S		2.p 00			
	Reimbursement from						
	x political contributions intended	Austin, TX 7870	1				
	PURPOSE OF	Category (See Cate	egories listed at the top of this sche	edule)	Description	_	el outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees			Ctata Day Fara	Check if Aus	tin, TX, officeholder living expense
					State Bar Fees		
	Complete ONLY if direct	 Candidate/Officeholde	r namo		Office cought		Office held
	expenditure to benefit	Candidate/Officeriolde	i naille		Office sought		Office field
	C/OH						

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE **G**

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Food/Beverage Expense Polling / - Gift/Awards/Memorials Expense Printing	Overhead/Rental Expense Expense g Expense s/Wages/Contract Labor	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						
1	Total pages Schedule G:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)				
L	Sch: 3/4 Rpt: 10/11	Burgess, Joshua T. (The Honorable)		00081906				
4	Date	5 Payee name						
	02/27/2025	Texas Center for the Judiciary						
6	Amount (\$) \$120.00	7 Payee address; City; State; Zip	Code					
	\$120.00 Reimbursement from	1210 San Antonio, Ste 800						
	political contributions intended	Austin, TX 78701						
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
	EXPENDITURE	Event Expense	Continuing Educ	ation Class Registration				
			Somming Educa	auon olass registration				
9	Complete ONLY if direct expenditure to benefit C/OH	I Candidate/Officeholder name	Office sought	Office held				
	Date	Payee name						
	03/06/2025	Texas de Brazil Payee address; City; State; Zip						
	Amount (\$)							
	\$134.90	101 N Houston St						
	Reimbursement from political contributions intended	Fort Worth, TX 76102						
	PURPOSE OF	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Food/Beverage Expense	Office Lunch	Check if Austin, TX, officeholder living expense				
			Cince Editori					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	I Candidate/Officeholder name	Office sought	Office held				
	Date	Payee name						
L	06/02/2025	Trader Joe's						
	Amount (\$)	Payee address; City; State; Zip	Code					
	\$15.13	2701 S Hulen St						
	Reimbursement from political contributions intended	Fort Worth, TX 76109						
	PURPOSE OF	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Gift/Awards/Memorials Expense	Gift for staff	Check if Austin, TX, officeholder living expense				
			Gilt for Staff					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	 Candidate/Officeholder name	Office sought	Office held				

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 4/4 Rpt: 11/11 Burgess, Joshua T. (The Honorable) 00081906 Date Payee name 02/06/2025 **USPS** 6 Amount (\$) Payee address; City; State; Zip Code 3101 W 6th St. \$210.00 Reimbursement from political contributions intended Х Fort Worth, TX 79107-2778 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense **EXPENDITURE** PO Box Rental Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH