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) 00087442 71 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Lillian Henny NAME Date Received **ELECTRONICALLY FILED** 07/15/2025 NICKNAME LAST **SUFFIX** Alexander CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; 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** Ms. Amy Elizabeth NAME NICKNAME LAST **SUFFIX** Tomlinson **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** (954) 483-8832 **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** Day Month Year χ Primary Runoff Other 03/07/2028 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 507 District Judge District 507

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 71

13 C / OH NAME	Alexander, Lillian He	nny (The Honorable	9)	14 Filer ID 00087442	(Ethics Con	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures i	accepted or political expenditu may have been made without t quired to report this information	the candidate's or off	iceholder's kr	nowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
ш -	GENERAL					
		COMMITTEE ADDR	RESS			
	SPECIFIC					
		COMMITTEE CAMP	PAIGN TREASURER NAME			
		COMMITTEE CAMP	PAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION	1. TOTAL UNITEM	IZED POLITICAL CO	NTRIBUTIONS(OTHER THAN	 I PLEDGES, LOANS		
TOTALS	OR GUARANTE	ES OF LOANS, OR C	CONTRIBUTIONS MADE ELE		\$	0.00
		ICAL CONTRIBUT PLEDGES, LOANS, (TIONS OR GUARANTEES OF LOAN:	S)	\$	45,821.62
EXPENDITURE TOTALS					\$	516.15
	4. TOTAL POLIT	ICAL EXPENDITU	RES		\$	31,065.87
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		S MAINTAINED AS OF THE L	AST DAY OF THE	\$	121,944.81
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT						
		tr	swear, or affirm, under penalty ue and correct and includes a nder Title 15, Election Code.	/ of perjury, that the a	accompanying d to be report	g report is ed by me
			The Honorabl	le Lillian Henny Ale	exander	
		_	Signature of	Candidate or Officeh	nolder	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subs	cribed before me, by the s	aid		, this the		day
			ny hand and seal of office.			
Signature of offi	cer administering oath	Printed name o	f officer administering oath	Title of office	cer administe	ring oath
•	3					Ž

SUBTOTALS - JC/OH

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

					30171
18 FII	ER NAM	ME .	19 Filer ID	(Ethic	cs Commission Filers)
Al	exande	r, Lillian Henny (The Honorable)	00087442		
		E SUBTOTALS			SUBTOTAL AMOUNT
N/	ME OF	SCHEDULE			
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	41,100.00
2.	X	\$	4,721.62		
3.		\$			
4.		\$			
5.	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS				31,065.87
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	115,000.00
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS				
10	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (DF C/OH	\$	
11	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12	. X	\$	2,510.14		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 1/25 Rpt: 4/71
2	FILER NAME Alexander, L	illian Henny (The Honorable	5)		3	Filer ID (Ethics Commission Filers) 00087442
4	Date 02/20/2025	5 Full name of contributor Anne E Kennedy, PC6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$250.00
		Houston, TX 77008		_		
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm 11 Law firm of contributor's spo				oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date 02/20/2025	Full name of contributor Asmus, Charlotte Contributor address; City;	out-of-state PAC (ID#:_			Amount of Contribution (\$) \$500.00
		Houston, TX 77024				
	Contributor's I Attorney	Principal Occupation		Contributor's Job Title Partner		
	Contributor's of The Rainwat	employer/law firm ter Firm s a child, law firm of parent(s) (i	f any)	Law firm of contributor's sp	oous	se (if any)
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Т	Amount of Contribution (\$)
	02/18/2025	Avalos, Gianni Contributor address; City; Granbury, TX 77002	<u> </u>			\$1,000.00
	Contributor's I	Principal Occupation		Contributor's Job Title	•	
	Attorney			Founding Partner		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
		ly Trial Attorneys PLLC s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 2/25 Rpt: 5/71
2	FILER NAME Alexander, L	illian Henny (The Honorable)		1	Filer ID (Ethics Commission Filers)
4	Date 02/20/2025	5 Full name of contributor Bates, Nicole6 Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$) \$250.00
		Houston, TX 77024				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney Attorney					
10		employer/law firm e of Representatives		11 Law firm of contributor's sp	oouse	e (if any)
12		s a child, law firm of parent(s) (if	anv)			
	. II continuator i	o a orma, favo mini or paromito) (ii	u.,,,			
H	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	02/03/2025	Bolton, Ruby Contributor address; City; \$	State; Zip Code			\$200.00
		The Woodlands, TX 773	80			
		Principal Occupation		Contributor's Job Title		
	Attorney			Principal		
	The Bolton L	employer/law firm		Law firm of contributor's sp	oouse	e (if any)
_		s a child, law firm of parent(s) (if	anvi			
	ii continuator i	o a crima, law iiriri or parcria(o) (ii	uily)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ.	Amount of Contribution (\$)
	03/04/2025	Bonney, Jerry	_			\$1,000.00
	Contributor address; City; State; Zip Code					
		Houston, TX 77025				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Lawyer			Lawyer		
		employer/law firm		Law firm of contributor's sp	oouse	e (if any)
		ney & Associates				
	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: 3/25 Rpt: 6/71
2	FILER NAME Alexander, L	illian Henny (The Honorable	2)		3	Filer ID (Ethics Commission Filers) 00087442
4	Date 02/20/2025	5 Full name of contributor Bouie, Shamier6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$100.00
		Houston, TX 77004				
8		Principal Occupation		9 Contributor's Job Title		
	Not Employed Not Employed					
10	Contributor's e Not Employe	employer/law firm ed		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)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	02/24/2025	Brock, Julie Contributor address; City;	State; Zip Code			\$1,000.00
	Caratuila utaula I	Houston, TX 77047		Contributorio Joh Title		
	Attorney	Principal Occupation		Contributor's Job Title		
_		and a sault assisting		Attorney		and (if a man)
	Martindale-F	employer/law firm		Law firm of contributor's sp	Jou:	se (II arry)
		s a child, law firm of parent(s) (i	f any)			
	ii continuator i	s a cilliu, iaw iiiiii oi pareiii(s) (i	i aliy)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	01/09/2025	Brown, Ceddrick				\$1,000.00
		Contributor address; City; Houston, TX 77057	State; Zip Code		·	
	Contributor's I	rincipal Occupation		Contributor's Job Title		
	Logistics			Principal		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Logistical Co	oncepts, LLC				
	If contributor is	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 ho	w to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 4/25 Rpt: 7/71
2	FILER NAME Alexander, L	illian Henny (The Honorable	e)		3 Filer ID (Ethics Commission Filers) 00087442
4	Date 02/20/2025	5 Full name of contributor Bruce, Melissa	out-of-state PAC (ID#:		7 Amount of Contribution (\$) \$250.00
		Spring, TX 77380			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
	Attorney			Owner	
10	Contributor's Bruce Law F	employer/law firm		11 Law firm of contributor's s	pouse (if any)
12	If contributor i	s a child, law firm of parent(s) (i	f any)		
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	02/13/2025	Carlin, Amy	out or state 1740 (IB//.		\$500.00
		Contributor address; City;	State: 7in Code		
		Contributor address, City,	State, Zip Code		
		Houston, TX 77002			
		Principal Occupation		Contributor's Job Title	
	Attorney			Principal	
		employer/law firm		Law firm of contributor's s	pouse (if any)
	The Carlin L	aw Firm			
	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 (\$)
	02/20/2025	Cerf, Lawrence			\$250.00
			State: 7in Code		··· <mark>·</mark>
			,		
		Houston, TX 77056			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Lawyer			Principal	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Lawrence F	Cerf Attorney at Law			
	If contributor i	s a child, law firm of parent(s) (i	f any)		

	MONET	ARY POLITICAL (CONTRIBUTIO	DNS		SCHEDULE A(J)1
	The Instru	ction Guide explains hov	v to complete this f	orm.	1	Total pages Schedule A(J)1: Sch: 5/25 Rpt: 8/71
2	FILER NAME Alexander, L	illian Henny (The Honorable)			3	Filer ID (Ethics Commission Filers) 00087442
4	Date 03/05/2025	5 Full name of contributor Chavez, Kevin6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$) \$100.00
		Houston, TX 77036				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney Solo Practitioner					
10	Contributor's 6 Kevin Chave	employer/law firm ez PLLC		11 Law firm of contributor's sp	ous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if a	any)	l		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)
	02/19/2025	Clevenger, George Contributor address; City; S	tate; Zip Code			\$1,000.00
		Spring, TX 77379				
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	ous	se (if any)
_		renger Attorney at Law s a child, law firm of parent(s) (if a	anu)			
	ii continuator i	s a clillu, iaw ilitii oi paletii(s) (ii c	arry)			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)
	02/20/2025	Clinton E. Wells, Jr., LLC				\$500.00
		Contributor address; City; S Houston, TX 77006	tate; Zip Code			
_	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor 3 i	тистра Оссаранот		Contributor 3 300 Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if a	any)	<u> </u>		

	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: 6/25 Rpt: 9/71
2	FILER NAME Alexander, L	illian Henny (The Honorable	2)		3	Filer ID (Ethics Commission Filers) 00087442
4	Date 02/20/2025	5 Full name of contributorDaniels, Cassandra6 Contributor address; City;	out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$250.00
		Houston, TX 77002				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney Principal					
10	10 Contributor's employer/law firm Daniels Law Firm PLLC 11 Law firm of contributor's spo			oous	se (if any)	
12	If contributor is	s a child, law firm of parent(s) (i	f any)	I .		
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	03/04/2025	Elizalde, Laura Contributor address; City;	State; Zip Code			\$200.00
		Houston, TX 77007				
		Principal Occupation		Contributor's Job Title		
	Lawyer			Owner		
		employer/law firm ation Offices of Laura Elizald	lo.	Law firm of contributor's sp	oous	se (If any)
		s a child, law firm of parent(s) (i				
	ii contributor i	s a crilid, law littii or pareril(s) (i	i aliy)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)
	01/04/2025	England, Angela	_			\$500.00
		Contributor address; City; Houston, TX 77024	State; Zip Code			
_	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney	- Inicipal Occupation		Partner		
H		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Tindall Engla			· ·		
	If contributor is	s a child, law firm of parent(s) (i	f any)	1		

	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: 7/25 Rpt: 10/71
2	FILER NAME Alexander, L	illian Henny (The Honorable)		3	Filer ID (Ethics Commission Filers) 00087442
4	Date 02/19/2025	Full name of contributor Garcia, Rogelio Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$250.00
		Houston, TX 77023				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
	Lawyer			Principal		
10	10 Contributor's employer/law firm 11 Law firm of contributor's spot Law Office of Rogelio Garcia			oous	se (if any)	
12	If contributor is	s a child, law firm of parent(s) (if	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	01/23/2025	Golden, Brian Contributor address; City;				\$25.00
	O a stalle at a size I	Silver Spring, MD 20906)	O antilla de de Tide		
		Principal Occupation of Homeland Security		Contributor's Job Title Financial Analyst		
	•	employer/law firm		Law firm of contributor's sp	2011	co (if any)
	Financial An			Law iiiii or contributor 3 3	Jou	se (ii diiy)
		s a child, law firm of parent(s) (if	any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:		T	Amount of Contribution (\$)
	03/04/2025	Goldsberry, Shari	out of state 1 Ae (15#.)		\$1,500.00
		Contributor address; City; : Texas City, TX 77590	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Attorney			Managing Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Goldsberry F	Portz Divorce & Family Lawy	ers PLLC			
	If contributor is	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: 8/25 Rpt: 11/71
2	FILER NAME Alexander, L	illian Henny (The Honorable	9)		3	Filer ID (Ethics Commission Filers) 00087442
4	Date 01/10/2025	5 Full name of contributor Green, Ashley6 Contributor address; City;	out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$500.00
		Manvel, TX 77578				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
	Attorney			Principal		
10	10 Contributor's employer/law firm Law Office of A. Green			oous	se (if any)	
12	If contributor is	s a child, law firm of parent(s) (i	f any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)
	02/12/2025	Gregory, Myrna Contributor address; City;	State; Zip Code			\$2,500.00
		Houston, TX 77041				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Lawyer			Partner		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Gregory Lav					
	If contributor is	s a child, law firm of parent(s) (i	fany)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)
	02/12/2025	Guidry, Myrna	_			\$250.00
		Contributor address; City; Houston, TX 77035	State; Zip Code		•	
-	Contributor's F	I Principal Occupation		Contributor's Job Title		
	Attorney			Owner		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Law Office o	f Myrna S. Guidry				
	If contributor is	s a child, law firm of parent(s) (i	f any)	1		

	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: 9/25 Rpt: 12/71
2	FILER NAME	illian Henny (The Honorable	<u> </u>		3	Filer ID (Ethics Commission Filers) 00087442
4	Date 02/20/2025	Full name of contributor Gutheinz Law Firm LLP Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$250.00
		Pearland, TX 77581				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm 11 Law firm of contributor's spo			oous	se (if any)	
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date 02/20/2025	Full name of contributor Hale, Hal Contributor address; City;	out-of-state PAC (ID#:			Amount of Contribution (\$) \$500.00
		Houston, TX 77079				
	Contributor's I Attorney	Principal Occupation		Contributor's Job Title Owner		
	Contributor's e	employer/law firm m P.C. s a child, law firm of parent(s) (i	f any)	Law firm of contributor's sp	oous	se (if any)
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	03/05/2025	Harris, Aletha Contributor address; City; Conroe, TX 77301	<u> </u>			\$100.00
		Principal Occupation		Contributor's Job Title		
	Attorney			Owner		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
		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 ho	w to complete this	form.	1 Total pages Schedule A(J)1: Sch: 10/25 Rpt: 13/71
2	FILER NAME	illian Henny (The Honorable)		3 Filer ID (Ethics Commission Filers) 00087442
4	Date 02/20/2025	Full name of contributor Harrison, Ronnie Contributor address; City;	out-of-state PAC (ID#:		7 Amount of Contribution (\$) \$1,000.00
		Houston, TX 77002			
8		Principal Occupation		9 Contributor's Job Title	
	Attorney Owner				
10	10 Contributor's employer/law firm11 Law firm of contributor's spoHarrison Law Office PCHarrison Law Office, PC				
40	Harrison Law Office PC Harrison Law Office, F				C
12	ii contributor i	s a child, law lirm of parent(s) (ii	any)		
_	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	02/18/2025	Hatamleh, Fayez Contributor address; City;	State; Zip Code		\$500.00
		Friendswood, TX 77546		T	
		Principal Occupation		Contributor's Job Title	
_	Attorney	employer/law firm		Principal Law firm of contributor's sp	nouse (if any)
	Fayez Law (, ,		Law IIIII of Contributor's Sp	pouse (ii arry)
_		s a child, law firm of parent(s) (if	anv)		
		o a oa, iam o. paro(o) (a,,		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	03/03/2025	Indelicato Jr., Joseph			\$500.00
		Contributor address; City; Richmond, TX 77469	State; Zip Code		
_	Contributor's	Principal Occupation		Contributor's Job Title	
	Attorney	Tincipal Occupation		Owner	
		employer/law firm		Law firm of contributor's sp	pouse (if any)
	Joseph Inde				F(ty)
	If contributor is	s a child, law firm of parent(s) (if	any)	1	

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 11/25 Rpt: 14/71
2	FILER NAME Alexander, L	illian Henny (The Honorable	5)		3	Filer ID (Ethics Commission Filers) 00087442
4	Date 02/07/2025			7	Amount of Contribution (\$) \$1,000.00	
		Houston, TX 77046		1		
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp				oous	e (if any)
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/20/2025 John E. Van Ness, PC Contributor address; City; State; Zip Code				\$2,500.00	
		Houston, TX 77098				
	Contributor's I	Principal Occupation		Contributor's Job Title	•	
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
03/05/2025 Jonte, Christine Contributor address; City; State; Zip Code				\$250.00		
		Houston, TX 77090		_		
	Contributor's I Attorney	Principal Occupation		Contributor's Job Title Managing Attorney		
		employer/law firm		Law firm of contributor's sp	ากเเร	e (if any)
Contributor's employer/law firm Law firm of contributor's s Christine K Jonte & Associates					5040	o (ii aiiy)
	If contributor is	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 ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 12/25 Rpt: 15/71
2	FILER NAME Alexander, L	illian Henny (The Honorable	2)		3	Filer ID (Ethics Commission Filers) 00087442
4	Date 01/30/2025			7	Amount of Contribution (\$) \$250.00	
		Pearland, TX 77584				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney Principal					
10	10 Contributor's employer/law firm Law Firm of Bade O. Lawal ,PLLC				oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)	I.		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)
	02/20/2025	Lee, Chung Contributor address; City;	<u> </u>			\$500.00
		Houston, TX 77002				
		Principal Occupation		Contributor's Job Title		
	Lawyer			Managing Attorney		
	C Y Lee lega	employer/law firm		Law firm of contributor's sp C.Y Lee Legal Group	oous	se (if any)
		s a child, law firm of parent(s) (i	f any)	C.1 Lee Legal Group		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/12/2025	Lee, Daniel Contributor address; City; Katy, TX 77494	State; Zip Code			\$1,000.00
	Contributor's I	Principal Occupation		Contributor's Job Title	•	
	Attorney			Managing Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	C.Y. Lee Le					
	If contributor is	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 ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 13/25 Rpt: 16/71
2	FILER NAME Alexander, L	illian Henny (The Honorable	<u>)</u>		1	Filer ID (Ethics Commission Filers) 00087442
4	Date 03/05/2025	Lockings, Elton 6 Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,000.00	
		Houston, TX 77036				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Owner		
10	10 Contributor's employer/law firmElton R Lockings PC11 Law firm of contributor's sp				oous	e (if any)
12	! If contributor is	s a child, law firm of parent(s) (if	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	03/04/2025 McBride, Taylor Contributor address; City; State; Zip Code				\$50.00	
	0	Sugar Land, TX 77479		Occasilla de de Tida		
	Pharmacist	Principal Occupation		Contributor's Job Title Pharmacist		
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
	HEB					
	If contributor is	s a child, law firm of parent(s) (il	fany)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/21/2025	McFerren, Eric				\$500.00
		Contributor address; City; Richmond, TX 77407	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's employer/law firm Law firm of contributor's s				oous	e (if any)
	Anderson &	Smith, PC				
	If contributor is	s a child, law firm of parent(s) (if	f 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: 14/25 Rpt: 17/71
2	FILER NAME Alexander, L	illian Henny (The Honorable)		3	Filer ID (Ethics Commission Filers) 00087442
4	Date 03/04/2025	5 Full name of contributorMcFerren, Eric6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$500.00
		Richmond, TX 77407				
8		Principal Occupation		9 Contributor's Job Title		
	Lawyer Lawyer					
10	10 Contributor's employer/law firm Anderson & Smith, PC				oous	e (if any)
12		s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	01/01/2025	McIerran, Susan Contributor address; City;	State; Zip Code			\$1,000.00
	O a materilla cata and a 1	Houston, TX 77005		O antilla de de Tide		
	Attorney	Principal Occupation		Contributor's Job Title Attorney		
H		employer/law firm		Law firm of contributor's sp	าดบร	se (if any)
	Fullenweide					- (,)
	If contributor is	s a child, law firm of parent(s) (if	any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/03/2025 Melcher, Porsha Contributor address; City; State; Zip Code			\$75.00		
		Corpus Christi, TX 7841	8			
		Principal Occupation		Contributor's Job Title		
	Student			Student		
Contributor's employer/law firm Law firm of contributor's s				Law firm of contributor's sp	oous	e (if any)
	Student If contributor is	s a child, law firm of parent(s) (if	anvl			
	ii contributor i	s a ciliiu, iaw iiiiii oi pareiii(s) (ii	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: 15/25 Rpt: 18/71
2	FILER NAME	illian Henny (The Honorable))		3	Filer ID (Ethics Commission Filers) 00087442
4	Date 02/20/2025	Full name of contributor Moon, Tammy Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$500.00
		Houston, TX 77004				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney Attorney					
10	10 Contributor's employer/law firm Schlanger Silver LLP				oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)	I		
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/20/2025	Moore, Roy Contributor address; City;	State; Zip Code			\$300.00
		Houston, TX 77046		I 0		
	Attorney	Principal Occupation		Contributor's Job Title Attorney		
		employer/law firm		Law firm of contributor's sp	20116	co (if any)
	RLM Law Fir			Law iiiii or contributor 5 5	Jour	se (ii diiy)
		s a child, law firm of parent(s) (i	f any)	1		
H	Date	Full name of contributor	out-of-state PAC (ID#:		Π	Amount of Contribution (\$)
	02/14/2025	Moore Jr, Tyler	U out-of-state FAC (ID#.			\$250.00
		Contributor address; City; Houston, TX 77056	State; Zip Code			
	Contributor's F	rincipal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Principal		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	W. Tyler Mo	ore, PC				
	If contributor is	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 ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 16/25 Rpt: 19/71
2	FILER NAME Alexander, L	illian Henny (The Honorable	2)		3	Filer ID (Ethics Commission Filers) 00087442
4	Date 02/04/2025	5 Full name of contributor Nass, Joel6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$500.00
		Houston, TX 77046				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
	Lawyer Principal					
10	10 Contributor's employer/law firm Law Offices of Joel A Nass PC				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 (\$)
	03/03/2025	Newman, Bobby Contributor address; City;	State; Zip Code			\$2,500.00
		Houston, TX 77098				
		Principal Occupation		Contributor's Job Title		
	Attorney			Owner		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
_	Bobby K. Ne		f any)			
	ii contributor i	s a child, law firm of parent(s) (i	i aliy)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	03/04/2025	Nolen, Rand				\$250.00
Contributor address; City; State; Zip Code						
	Contributor's	Houston, TX 77019 Principal Occupation		Contributor's Job Title		
	Lawyer	-Tiricipal Occupation		Partner		
		emplover/law firm		Law firm of contributor's sp	oous	se (if any)
Contributor's employer/law firm Law firm of contributor's s Fleming Nolen & Jez L.L.P.						
	If contributor is	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 ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 17/25 Rpt: 20/71
2	FILER NAME Alexander, L	illian Henny (The Honorable	·)		1	Filer ID (Ethics Commission Filers) 00087442
4	Date 02/19/2025	Post, Stephen 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$1,000.00	
		Houston, TX 77027				
8		Principal Occupation		9 Contributor's Job Title		
	Lawyer					
10	10 Contributor's employer/law firm				pouse	e (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/21/2025	Proffitt, Stephanie Contributor address; City;	State; Zip Code			\$1,000.00
		Houston, TX 77002				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Founding Attorney		
		employer/law firm		Law firm of contributor's sp	pouse	e (if any)
	Proffitt Fami	-				
	If contributor is	s a child, law firm of parent(s) (if	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/25/2025	Ramirez, Karina	_			\$250.00
Contributor address; City; State; Zip Code						
	0	Houston, TX 77006		I 0 . 7		
	Attorney	Principal Occupation		Contributor's Job Title Owner		
		employer/law firm		Law firm of contributor's sp	nouse	e (if any)
		f Karina A. Ramirez		Law iiiii or contributor 3 3	pousi	s (ii airy)
		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: 18/25 Rpt: 21/71
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Alexander, L	der, Lillian Henny (The Honorable)			L	00087442
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Randall, Beatrice 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$100.00		
		Houston, TX 77084				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Attorney Principal			Principal		
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp				ous	se (if any)
	The Randall	Law Office PLLC		The Randall Law Office	ΡL	LC
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 (\$)
	03/04/2025	Reed, Marsha Contributor address; City;	State; Zip Code			\$500.00
		Houston, TX 77006		_		
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Principal		
		employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Law Office o	f Marsha Reed				
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	03/04/2025	Reul, Diane	<u> </u>			\$250.00
		Contributor address; City; Houston, TX 77024	State; Zip Code		•	
_	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Lawyer	molpai Occupation		Lawyer		
_		emnlover/law firm		<u> </u>	יחחוי	se (if any)
Contributor's employer/law firm Law firm of contributor's s Law Office of Matt Tyson					,ou.	se (ii diiy)
		s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL (SCHEDULE A(J)1		
	The Instru	ction Guide explains hov	v to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 19/25 Rpt: 22/71
2	FILER NAME Alexander, L	illian Henny (The Honorable)			3 Filer ID (Ethics Commission Filers) 00087442
4	Date 02/20/2025				7 Amount of Contribution (\$) \$250.00
8	Contributor's Principal Occupation 9 Contributor's Job Title			9 Contributor's Job Title	
	Attorney			Partner	
10	O Contributor's employer/law firm Revack Samaan & Muller, LLP			oouse (if any)	
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 (\$)
	03/04/2025 Richmond, Lacey Contributor address; City; State; Zip Code Alvin, TX 77511				\$1,000.00
	Contributor's I	<u>I</u> Principal Occupation		Contributor's Job Title	
	Attorney			Principal	
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)
	Richmond L	aw Firm			
	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 (\$)
	03/04/2025 Rogers, Gail Contributor address; City; State; Zip Code Houston, TX 77057			\$50.00	
	Contributor's I	Principal Occupation		Contributor's Job Title	
	Professor			Professor	
	Contributor's employer/law firm Law firm of contributor's sp				oouse (if any)
	Texas A&M	University			
	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: 20/25 Rpt: 23/71
2	FILER NAME Alexander, L	illian Henny (The Honorable)		3	Filer ID (Ethics Commission Filers) 00087442
4	Date 02/20/2025	Full name of contributor Runge, Barbara Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$500.00
		Houston, TX 77005				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney Principal					
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp				oous	se (if any)
_		nge Attorney at Law				
12	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/20/2025 Simms Law Group, PLLC Contributor address; City; State; Zip Code				\$1,000.00	
		Houston, TX 77036				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/19/2025	Stout, Angela				\$500.00
Contributor address; City; State; Zip Code Houston, TX 77008			•			
	Contributor's I	rincipal Occupation		Contributor's Job Title		
	Attorney			Principal		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	The Stout Law Firm The Curley Law Firm					
	If contributor is	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: 21/25 Rpt: 24/71
2	FILER NAME Alexander I	illian Henny (The Honorable	n)		1	Filer ID (Ethics Commission Filers) 00087442
4	Date 01/19/2025			_	Amount of Contribution (\$) \$250.00	
		Mansfield, TX 76063				
8		Principal Occupation		9 Contributor's Job Title		
	Education President					
10	10 Contributor's employer/law firm Rocky Mountain Prep				oous	e (if any)
12	! If contributor is	s a child, law firm of parent(s) (if	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	01/04/2025	Taylor, Sarah Contributor address; City;	State; Zip Code			\$100.00
		Oak Park, IL 60304				
		Principal Occupation		Contributor's Job Title		
	Therapist			Therapist		
		employer/law firm	Igoos	Law firm of contributor's sp	oous	e (if any)
_		ttee for Immigrants and Refuse a child, law firm of parent(s) (if				
	ii contributor i	s a cilliu, iaw iiiiii oi pareiii(s) (ii	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	03/04/2025	Thornton, Rahlita	_			\$500.00
		Contributor address; City;	State; Zip Code			
	Contributorio	Houston, TX 77098		Contributorio Joh Titlo		
	Lawyer	Principal Occupation		Contributor's Job Title Managing Attorney		
	Contributor's employer/law firm Law firm of contributor's s				oous	e (if anv)
		quire Law Group PLLC				- (,)
	If contributor is	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: 22/25 Rpt: 25/71
2	FILER NAME	illian Henny (The Honorable	a)		3	Filer ID (Ethics Commission Filers) 00087442
4	Date 01/31/2025	 Full name of contributor Thrash, Christine Contributor address; City; 	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$500.00
		Pearland, TX 77584				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Attorney Principal					
10	10 Contributor's employer/law firmLaw Office of Christine R. Thrash, PLLC				oous	e (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)	I.		
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/25/2025	Tran, Thao Contributor address; City;	State; Zip Code			\$500.00
		Houston, TX 77002				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Attorney			Owner		
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
		ices of Thao T. Tran				
	if contributor is	s a child, law firm of parent(s) (i	r any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	03/05/2025	Tyson, Matt	_			\$1,000.00
		Contributor address; City; Houston, TX 77002	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney	iniopai Goodpaion		Owner		
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
Law Office of Matt Tyson PLLC						
	If contributor is	s a child, law firm of parent(s) (i	f any)	1		

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A(J)1	
	The Instruction Guide explains how to complete this form.				s Schedule A(J)1: 5 Rpt: 26/71		
2	FILER NAME Alexander, L	illian Henny (The Honorable)		3 Filer ID (Ethics Commission Filers)	
4				Contribution (\$) \$250.00			
		Houston, TX 77008					
8	Contributor's F	Principal Occupation		9 Contributor's Job Title			
	Lawyer			Managing Partner			
10		employer/law firm ez & Associates		11 Law firm of contributor's sp	oouse (if any)		
12		s a child, law firm of parent(s) (if	any)				
		T					
	Date 03/05/2025	Full name of contributor Walters, Brian Contributor address; City;	out-of-state PAC (ID#:)	Amount of	Contribution (\$) \$500.00	
	Contributor's I	Houston, TX 77002 Principal Occupation		Contributor's Job Title			
	Attorney			Partner			
		employer/law firm		Law firm of contributor's sp	oouse (if any)		
	Walters Gilb		:				
	If contributor is	s a child, law firm of parent(s) (i	any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of	Contribution (\$)	
	01/13/2025	Williams, Jason Contributor address; City;	State; Zip Code			\$50.00	
		Round Rock, TX 78664					
		Principal Occupation		Contributor's Job Title			
	Apple			Supply Chain Manager			
	Supply Chai	employer/law firm n Manager		Law firm of contributor's sp	oouse (if any)		
		s a child, law firm of parent(s) (if	any)				

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A(J)1	
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A(J)1: Sch: 24/25 Rpt: 27/71		
2	FILER NAME Alexander, L	illian Henny (The Honorable	·)		3	Filer ID (Ethics Commission Filers) 00087442	
4			7	Amount of Contribution (\$) \$50.00			
		Round Rock, TX 78664					
8		Principal Occupation		9 Contributor's Job Title			
	Apple			Supply Chain Manager			
10	Contributor's 6 Supply Chai	employer/law firm n Manager		11 Law firm of contributor's sp	oous	e (if any)	
12		s a child, law firm of parent(s) (if	any)	<u> </u>			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/17/2025	Witty, Joanne Contributor address; City;	State; Zip Code			\$1,000.00	
		Bedford Hills, NY 10507					
	Contributor's F	Principal Occupation		Contributor's Job Title			
	Not Employe	ed		Not Employed			
		employer/law firm		Law firm of contributor's sp	oous	e (if any)	
	Not Employe		(any)				
	ii contributor ii	s a child, law firm of parent(s) (if	any)				
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	01/11/2025	Young, Bobbie		,		\$50.00	
		Contributor address; City; Houston, TX 77036	State; Zip Code				
-	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>		
	Attorney			Principal			
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)	
		ice of Bobbie Young RN JD					
	If contributor is	s a child, law firm of parent(s) (if	any)				

	MONET	ARY POLITICAL CONTRIBU	SCHEDULE A(J)1		
	The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 25/25 Rpt: 28/71	
2	FILER NAME			3 Filer ID (Ethics Commission Filers) 00087442	
Alexander, Lillian Henny (The Honorable) 4 Date		7 Amount of Contribution (\$) \$50.00			
		Houston, TX 77036			
8	Contributor's	Principal Occupation	9 Contributor's Job Title		
	Attorney		Owner		
10		employer/law firm	11 Law firm of contributor's s	pouse (if any)	
	The Law Off	fice of Bobbie Young RN JD			
12	If contributor i	s a child, law firm of parent(s) (if any)			
	Date	Full name of contributor	/ID#· \	Amount of Contribution (\$)	
	02/20/2025	Young, Bobbie	(10#)	\$250.00	
	02/20/2020				
		Contributor address; City; State; Zip Code			
		Houston, TX 77036			
	Contributor's	Principal Occupation	Contributor's Job Title		
	Attorney		Owner		
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)	
	Bobbie Your	ng Attorney at Law			
	If contributor i	s a child, law firm of parent(s) (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: 29/71 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Alexander, Lillian Henny (The Honorable) 00087442 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 05/20/2025 Slate, Dennis \$4,721.62 | Event venue and 7 Contributor address; City; State; Zip Code refreshments Houston, TX 77006 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (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) Slate & Associates 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 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: Sch: 1/39 Rpt: 30/71	2 FILER NAME Alexander, Lillian Henny (The Honorable) 3 Filer ID (Ethics Commission Filers) 00087442
4	Date 01/01/2025	5 Payee name ActBlue
6	Amount (\$) \$64.13	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit card processing fees
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 02/03/2025	Payee name ActBlue
	Amount (\$) \$288.38	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit card processing fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 03/03/2025	Payee name ActBlue
	Amount (\$) \$161.25	Payee address; City; State; Zip Code 366 Summer Street
		Somerville, MA 02144
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit card processing fees
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Event Expense Accounting/Banking Fees
Consulting Expense Food/Beverage E
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Legal Services

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

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

	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: 2/39 Rpt: 31/71	Alexander, Lillian Henny (The Honorable) 00087442
4	Date	5 Payee name
	01/10/2025	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$64.92	410 Terry Avenue North
		Seattle, WA 98109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Office supplies
_		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiantare to benefit ere	
	Date	Payee name
	01/10/2025	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$73.60	410 Terry Avenue North
		Seattle, WA 98109
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Office supplies
		Cinic Supplies
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	v
	5 .	
	Date	Payee name
	01/15/2025	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$32.46	410 Terry Avenue North
		Seattle, WA 98109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Office supplies
	0 1. 0	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Oriana.o to borioni O/Oi	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/39 Rpt: 32/71 Alexander, Lillian Henny (The Honorable) 00087442 4 Date Payee name 01/16/2025 Amazon 6 Amount (\$) Payee address; City; State; Zip Code \$27.05 410 Terry Avenue North Seattle, WA 98109 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Office supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/17/2025 Amazon Amount (\$) Payee address; City; State; Zip Code \$7.57 410 Terry Avenue North Seattle, WA 98109 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Office supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/21/2025 Amazon Amount (\$) Payee address; City: State; Zip Code \$4.64 410 Terry Avenue North Seattle, WA 98109 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Office supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 4/39 Rpt: 33/71	Alexander, Lillian Henny (The Honorable) 00087442
4	Date	5 Payee name
	01/22/2025	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$18.39	410 Terry Avenue North
		Seattle, WA 98109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office supplies
		Office Supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
	Date	Payee name
	02/04/2025	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.50	410 Terry Avenue North
		Seattle, WA 98109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	_/	Check if Austin, TX, officeholder living expense
		Office supplies
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/03/2025	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$32.46	410 Terry Avenue North
		Seattle, WA 98109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Office supplies
	0 1. 0	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

spense Event Expense Loan Repayment/Reimbu

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

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

	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: 5/39 Rpt: 34/71	Alexander, Lillian Henny (The Honorable) 00087442
4	Date	5 Payee name
	02/10/2025	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.81	410 Terry Avenue North
		Seattle, WA 98109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Office supplies
		Стос варрное
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	the state of the s
H	Date	Dayso name
	02/10/2025	Payee name Amazon
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.81	410 Terry Avenue North
L		Seattle, WA 98109
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Office supplies
┢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	02/19/2025	Amazon
H	Amount (\$)	Payee address; City; State; Zip Code
	\$61.09	410 Terry Avenue North
	Ψ01.00	410 reny Avenue North
		Seattle, WA 98109
L	PURPOSE	In.
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Office supplies
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
Г		
ı		

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: Sch: 6/39 Rpt: 35/71	2 FILER NAME Alexander, Lillian Henny (The Honorable) 3 Filer ID (Ethics Commission Filers) 00087442
4	Date 02/24/2025	5 Payee name Apple
6	Amount (\$) \$29.21	7 Payee address; City; State; Zip Code 1 Apple Park Way
		Cupertino, CA 95014
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software subscription
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/24/2025	Apple
	Amount (\$) \$2.15	Payee address; City; State; Zip Code 1 Apple Park Way
		Cupertino, CA 95014
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software subscription
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 03/03/2025	Payee name Apple
	Amount (\$)	
	\$75.76	Payee address; City; State; Zip Code 1 Apple Park Way
		Cupertino, CA 95014
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software subscription
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

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

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

	Contributions/ Donations Made By 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:	
	Sch: 7/39 Rpt: 36/71	Alexander, Lillian Henny (The Honorable) 00087442
4	Date	5 Payee name
L	03/05/2025	Apple
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3.24	1 Apple Park Way
		Cupertino, CA 95014
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Software subscription
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	1
	Date	Payee name
	03/11/2025	Apple
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.99	1 Apple Park Way
		Cupertino, CA 95014
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Software subscription
		Software Subscription
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	U
-	Date	Payee name
	03/17/2025	Apple Apple
	Amount (\$)	Payee address; City; State; Zip Code
	\$7.57	1 Apple Park Way
		Cupertino, CA 95014
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Software subscription
		Software Subscription
	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 Comm 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 Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1	Sch: 8/39 Rpt: 37/71	2 FILER NAME Alexander, Lillian Henny (The Honorable) 3 Filer ID (Ethics Commission Filers) 00087442
4	Date	5 Payee name
	03/17/2025	Apple
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$21.64	1 Apple Park Way
		Cupertino, CA 95014
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Software subscription
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/24/2025	Apple
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.81	1 Apple Park Way
		Cupertino, CA 95014
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Software subscription
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/02/2025	Apple
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.76	1 Apple Park Way
		Cupertino, CA 95014
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Software subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

SCHEDULE F1

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

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/Officenoider/Politic	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 9/39 Rpt: 38/71	Alexander, Lillian Henny (The Honorable) 00087442
4 Date	5 Payee name
04/08/2025	Apple
6 Amount (\$) \$73.59	7 Payee address; City; State; Zip Code 1 Apple Park Way Cupertino, CA 95014
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H
Date	Payee name
04/14/2025	Apple
Amount (\$) \$9.99	Payee address; City; State; Zip Code 1 Apple Park Way Cupertino, CA 95014
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software subscription
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/28/2025	Apple
Amount (\$) \$41.10	Payee address; City; State; Zip Code 1 Apple Park Way
	Cupertino, CA 95014
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software subscription
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gitt/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

	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: 10/39 Rpt: 39/71	Alexander, Lillian Henny (The Honorable) 00087442
4	Date	5 Payee name
	05/02/2025	Apple
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$94.15	1 Apple Park Way
		Cupertino, CA 95014
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Software subscription
_		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/12/2025	Apple
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.99	1 Apple Park Way
		Cupertino, CA 95014
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Software subscription
		Software subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	
	·	
	Date	Payee name
	05/15/2025	Apple
	Amount (\$)	Payee address; City; State; Zip Code
	\$3.24	1 Apple Park Way
		Cupertino, CA 95014
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Software subscription
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experialitate to beliefit of of	<u> </u>

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
Ļ		· · · · · · · · · · · · · · · · · · ·	_
1	Total pages Schedule F1:		
L	Sch: 11/39 Rpt: 40/71	Alexander, Lillian Henny (The Honorable) 00087442	
4	Date	5 Payee name	
	05/23/2025	Apple	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$56.25	1 Apple Park Way	
		Cupertino, CA 95014	
8	PURPOSE		
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Software subscription	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
\vdash	Date	Davide name	_
	06/02/2025	Payee name Apple	
_		Apple State 7's Oak	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$83.33	1 Apple Park Way	
		Cupertino, CA 95014	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	LAI LADITURE	Check if Austin, TX, officeholder living expense	
		Software subscription	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L			
	Date	Payee name	
	06/11/2025	Apple	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$9.99	1 Apple Park Way	
		Cupertino, CA 95014	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	\dashv
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Software subscription	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
L	expenditure to benefit C/O	п	_

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al 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:		
	Sch: 12/39 Rpt: 41/71	Alexander, Lillian Henny (The Honorable) 00087442	
4	Date	5 Payee name	
	06/16/2025	Apple	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$3.24	1 Apple Park Way	
		Cupertino, CA 95014	
8	PURPOSE		\dashv
	OF		
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Software subscription	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	\dashv
	expenditure to benefit C/O		
\vdash	Date	Payee name	=
	06/17/2025	Payee name Apple	
_		Apple	_
	Amount (\$)	Payee address; City; State; Zip Code	
	\$45.44	1 Apple Park Way	
		Cupertino, CA 95014	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	- A LIDITONE	Check if Austin, TX, officeholder living expense	
		Software subscription	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Superiord to belieff 0/01		
	Date	Payee name	
L	06/27/2025	Apple	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$10.81	1 Apple Park Way	
		Cupertino, CA 95014	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	LAFENDITURE	Check if Austin, TX, officeholder living expense	
		Software subscription	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	experience to beliefft C/Of		

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 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: 13/39 Rpt: 42/71	Alexander, Lillian Henny (The Honorable) 00087442
4	Date	5 Payee name
	02/03/2025	Aquarium Restaruant
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$93.01	410 Bagby St
		Houston, TX 77002
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Staff lunch
		Star functi
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	02/10/2025	Avenida South Garage
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.00	1710 Polk St
		Houston, TX 77003
	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 Parking for Black Heritage Livestock Scholarhsip
		Tarking for black Heritage Livestock Scholamsip
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	Davida marea
	01/31/2025	Payee name Axelrad Beer Garden
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.48	1517 Alabama St
		Houston, TX 77004
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Staff Lunch
		Stall Eurich
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 14/39 Rpt: 43/71	Alexander, Lillian Henny (The Honorable) 00087442
4	Date	5 Payee name
	04/11/2025	Axelrad Beer Garden
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$6.41	1517 Alabama St
		Houston, TX 77004
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Staff Lunch
		Stall Eurich
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	03/26/2025	BB's Tex-Orleans
	Amount (\$)	Payee address; City; State; Zip Code
	\$58.55	515 Westheimer Rd
		Houston, TX 77006
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Staff Lunch
		Stan Euron
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	Davies same
	Date 02/19/2025	Payee name Bradford, Jasmine
	Amount (\$)	Payee address; City; State; Zip Code
	\$225.00	8002 Tavenor Ln
		Houston, TX 77075
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Social media for investiture
		Social Hieula Ioi ilivestiture
_	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 Commit

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		
<u> </u>	Tatalana Oliver		
1	Total pages Schedule F1:)
L	Sch: 15/39 Rpt: 44/71	Alexander, Lillian Henny (The Honorable) 00087442	
4	Date	5 Payee name	
	02/14/2025	Brennan's of Houston	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$12.63	3300 Smith St	
	,		
		Houston TX 77006	
		Houston, TX 77006	
8	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	
		Parking for Gulf Coast Attorneys Meeting	
		T arking for our coast Attorneys Meeting	
<u>_</u>	Complete ONLY if direct	Condidate/Officeholder name Office cought	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
L			
	Date	Payee name	
	02/10/2025	CJ's Masterpiece	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$375.00	3401 5th St	
		Stafford, TX 77477	
_	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Event catering	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
H	Date	Davida nama	
	Date 06/25/2025	Payee name CVS Pharmacy	
		· · · · · · · · · · · · · · · · · · ·	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$5.00	3401 Tidwell Rd	
		Houston, TX 77093	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Gift/Awards/Memorials Expense	
	LAFENDITURE	Check if Austin, TX, officeholder living expense	
		Birthday card for staff	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	п	

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			nmittee	Legal Services							
					ide explains how to c	ompl	lete this form.				
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Fi	lers)
	Sch: 16/39 Rpt: 45/71		Alexander, I	Lillian Henny (Th	ie Honorable)				00087442		
4	Date	5	Payee name								
	01/02/2025		Complete B	eauty Bar							
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip C	ode					
	\$353.57		5219 Almed		, ,						
	, , , , ,										
			11 T\	. 77004							
		⊢	Houston, TX			_					
8	PURPOSE OF	(a)		ee Categories listed at the	e top of this schedule)	(b)	Description				
	EXPENDITURE		Event Exper	nse					ide of Texas. Con , officeholder livin	nplete Schedule T.	
							Hair and Mak				
							rian and man		ap ioi ilivesi	iture priotos	
Ļ	Operation ONLY if allowed	L		l l - l	0#:				O#: I-	-1-1	
9	Complete ONLY if direct expenditure to benefit C/OH		Jandidate/Offic	ceholder name	Office so	ougnt			Office h	eid	
		_									
	Date		Payee name								
	01/28/2025		Constant Co	ontact							
	Amount (\$)		Payee addres	ss; City;	State; Zip C	ode					
	\$85.28		1601 Trapel	lo Road, 3rd Floo	or						
			Waltham, M	IA 02451							
_	DUDDOCE	_				/h)	1 5				
	PURPOSE OF	(a)		ee Categories listed at the		(0)	Description Check if travel	outei	ide of Teyes Con	nplete Schedule T.	
	EXPENDITURE		Office Overr	head/Rental Exp	ense		<u> </u>		, officeholder livin		
							Campaign en				
	Complete ONLY if direct		Candidate/Offi	ceholder name	Office so	ught			Office h	eld	
	expenditure to benefit C/O	Н				Ü					
_	Date		Davis a name								
	05/19/2025		Payee name Crawfish an	nd Noodlos							
	Amount (\$)		Payee addres		State; Zip C	code					
	\$16.24		11360 Bella	ire Blvd #990							
			Houston, TX	K 77072							
	PURPOSE	(a)	Category (Se	ee Categories listed at the	e top of this schedule)	(b)	Description				
	OF EXPENDITURE			age Expense	,		Check if travel	outsi	ide of Texas. Con	nplete Schedule T.	
	EXPENDITURE						_	, TX,	, officeholder livin	g expense	
							Staff Lunch				
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office so	ught	·		Office h	eld	
	expenditure to benefit C/O	H									
ı											

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide e	Salaries/V	/ages/	Contract Labor		OTHER (enter a	a category not listed	above)
_		I		Apidinis now to co	inpic	te tilis formi.	-			
1	Total pages Schedule F1:	1					3	Filer ID	(Ethics Commi	ssion Filers)
	Sch: 17/39 Rpt: 46/71	Alexander,	Lillian Henny (The H	onorable)				00087442		
4	Date	5 Payee name)							
	03/17/2025		Hermann Park							
_		7 Dayso addre	City	Ctata: Zin Ca	do					
О	Amount (\$)	7 Payee addre		State; Zip Co	ue					
	\$110.94	5925 Alme	аа ка А							
		Houston, T	X 77004							
8	PURPOSE	(a) Category			(b)	Description				
Ū	OF		See Categories listed at the top o	of this schedule)	(5)		outsi	ide of Texas. Con	nplete Schedule T.	
	EXPENDITURE	F00d/beve	rage Expense			=		, officeholder livin		
						Staff lunch				
_	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sou	aht			Office h	old	
9	expenditure to benefit C/OI		icendidei fiame	Office sou	grit			Office II	eiu	
	·	-								
	Date	Payee name	?							
	02/03/2025	District 7								
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de					
	\$23.57	501 Pierce	•	, ,						
	Ψ20.01	001110100	Ot .							
		Houston, T	X 77002							
	PURPOSE	(a) Category (S	See Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE		rage Expense			Check if travel	outs	ide of Texas. Con	nplete Schedule T.	
	LAFENDITORE					ш	, TX	, officeholder livin	g expense	
						Staff Lunch				
	Complete ONLY if direct		ficeholder name	Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н								
	Date	Dove nome								
		Payee name	;							
	01/13/2025	DonorBox								
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de					
	\$2.63	1520 Belle	View Blvd #4106							
		 Alexandria	, VA 22307							
	DUDDOCE	(-) -			(b)	D				
	PURPOSE OF	,	See Categories listed at the top	of this schedule)	(D)	Description	outo	ide of Toyon Com	nplete Schedule T.	
	EXPENDITURE	Fees				=		, officeholder living		
						Credit card p				
						2. Juli Juliu pi	. 50			
	Commission ONUV if allow it	Condidate /C	Saabaldan as	04	au la +			Office 1	ماما	
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sou	gnt			Office h	eid	
	S. Portaitare to benefit 6/01	. •								
-					_		_			

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services	Salaries/V	Vage	s/Contract Labor		OTHER (enter a	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: 18/39 Rpt: 47/71		Alexander,	Lillian Henny (The	Honorable)				00087442		
4	Date	5	Payee name								
	02/13/2025		DonorBox								
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip Co	ode					_
	\$2.63		•	View Blvd #4106							
	Ψ2.00		1020 20110	1100 2110 11 1200							
			A1	00007							
		L	Alexandria,	VA 22307							
8	PURPOSE OF	(a)	Category (Se	ee Categories listed at the to	op of this schedule)	(b)	Description				
	EXPENDITURE		Fees				=			pplete Schedule T.	
							Credit card p		officeholder livin	g expense	
							Credit card pr	100	cssing iccs		
_	- I					<u> </u>					
9	Complete ONLY if direct expenditure to benefit C/OI		Sandidate/Offi	ceholder name	Office sou	ight			Office h	eld	
	Date		Payee name								
	01/10/2025		Easy Canva	as Prints							
	Amount (\$)		Payee addres	ss; City;	State; Zip Co	ode					
	\$56.81		11525A Sto	nehollow Dr., Suite	e 100						
			Austin, TX 7	78758							
_	DUDDOCE	(0)				(b)	- · · ·				
	PURPOSE OF	(a)		ee Categories listed at the to		(0)	Description Check if travel	outsi	de of Texas, Com	nplete Schedule T.	
	EXPENDITURE		Office Overi	head/Rental Exper	ise		=		officeholder living		
							Office artwork	k			
	Complete ONLY if direct		 Candidate/Offi	ceholder name	Office sou	ıght			Office h	eld	
	expenditure to benefit C/OI	Н									
	Date	Г	Dayoo nama								_
	02/04/2025		Payee name Easy Canva	ne Drinte							
	Amount (\$)		Payee addres		State; Zip Co	ode					
	\$678.97		11525A Sto	nehollow Dr., Suite	e 100						
			Austin, TX 7	78758							
	PURPOSE	(a)	Category (Sr	ee Categories listed at the to	op of this schedule)	(b)	Description				
	OF EXPENDITURE			head/Rental Exper			Check if travel	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE			-					officeholder living	g expense	
							Office artwork	k			
	Complete ONLY if direct		Candidate/Offi	ceholder name	Office sou	ıght			Office h	eld	
	expenditure to benefit C/OI	H									
ı											

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

	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)
l	Sch: 19/39 Rpt: 48/71	Alexander, Lillian Henny (The Honorable) 00087442
4	Date	5 Payee name
l	02/03/2025	Etsy
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$21.63	117 Adams Street
l		
l		Brooklyn, NY 11201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Office Overhead/Rental Expense
l		Check if Austin, TX, officeholder living expense Office artwork
l		Office attwork
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
⊨	Date	Payee name
l	02/03/2025	Etsy
⊢	Amount (\$)	Payee address; City; State; Zip Code
l	\$21.72	117 Adams Street
l	Ψ=1.1.2	111 / danie edece
l		Brooklyn, NY 11201
┝	PURPOSE	
l	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		Office artwork
L		
l	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
┡		
l	Date	Payee name
L	02/03/2025	Etsy
l	Amount (\$)	Payee address; City; State; Zip Code
l	\$17.85	117 Adams Street
l		
L		Brooklyn, NY 11201
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l		Office artwork
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1

SCHEDULE F1

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

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 Credit Card Payment	Al 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: 20/39 Rpt: 49/71	Alexander, Lillian Henny (The Honorable) 00087442
4	Date	5 Payee name
L	04/18/2025	Four Seasons Hotel Houston
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$8.66	1300 Lamar St
		Houston, TX 77010
8	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
		Parking for GRB conference
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
	Date	Payee name
	03/17/2025	Freeprints
	Amount (\$)	Payee address; City; State; Zip Code
	\$146.01	23801 Calabasas Road, Suite 2005
		Calabasas, CA 91302
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Office artwork
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	01/21/2025	Garland Kashmere Productions
	Amount (\$)	Payee address; City; State; Zip Code
	\$11,000.00	6015 Granit Shadow Ln
		Porter, TX 77365
	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 Floral arrangements for investiture
		Floral arrangements for investiture
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		
l		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

	Credit Cara r ayment	The Instruction Guide explains how to con	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 21/39 Rpt: 50/71	Alexander, Lillian Henny (The Honorable)		00087442
4	Date	5 Payee name		·
	01/21/2025	GoDaddy		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$88.68	2155 East GoDaddy Way		
		Tempe, AZ 85284		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORE			Check if Austin, TX, officeholder living expense
				Campaign website hosting
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	,ht	Office held
9	expenditure to benefit C/O		JIIL	Office field
_	D-4-			
	Date	Payee name		
	01/24/2025	GoDaddy		
	Amount (\$)	Payee address; City; State; Zip Coc	de	
	\$536.75	2155 East GoDaddy Way		
		Tempe, AZ 85284		
	PURPOSE OF	, -	(b)	Description Description
	EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Campaign website hosting
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/O	1		
	Date	Payee name		
	02/25/2025	GoDaddy		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$204.42	2155 East GoDaddy Way		
		Tempe, AZ 85284		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF	Office Overhead/Rental Expense	` '	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	·		Check if Austin, TX, officeholder living expense
				Campaign website hosting
_	Operation ON IV II II	Condidate (Office halden no	ala e	0.65
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office soug	jnt	Office held

SCHEDULE F1

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

Fees Office Ov Food/Beverage Expense Polling E Gift/Awards/Memorials Expense Printing E Legal Services Salaries/

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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 22/39 Rpt: 51/71	Alexander, Lillian Henny (The Honorable) 00087442
4	Date	5 Payee name
	02/28/2025	GoDaddy
6	Amount (\$) \$44.34	7 Payee address; City; State; Zip Code 2155 East GoDaddy Way
		Tempe, AZ 85284
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign website hosting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/18/2025	GoDaddy
	Amount (\$) \$22.17	Payee address; City; State; Zip Code 2155 East GoDaddy Way
		Tempe, AZ 85284
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign website hosting
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/03/2025	Google
	Amount (\$) \$2.12	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway
		Mountain View, CA 94043
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online storage
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				OTHER (enter a category not listed above)			
				ns how to co	mple	ete this form.	_			
1	Total pages Schedule F1:	2 FILER NAMI	Ξ				3	Filer ID	(Ethics Commission Filers)	
	Sch: 23/39 Rpt: 52/71	Alexander,	Lillian Henny (The Honor	able)				00087442		
4	Date	5 Payee name								
	02/03/2025	Google								
6	Amount (\$)	7 Payee addre	ess; City; Sta	ite; Zip Co	de					_
	\$2.12	1600 Amph	nitheatre Parkway							
		-	•							
		 Mountain √	iew, CA 94043							
8	PURPOSE				(h)	Description				_
ľ	OF		ee Categories listed at the top of this head/Rental Expense	scnedule)	(2)		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE	Office Over	neau/Nentai Expense			=		officeholder living		
						Online storag	je			
9	Complete ONLY if direct		iceholder name	Office sou	ght			Office he	eld	_
	expenditure to benefit C/O	4								
	Date	Payee name								=
	03/03/2025	Google								
	Amount (\$)	Payee addre	ess; City; Sta	te; Zip Co	de					-
	\$2.12	1600 Amph	nitheatre Parkway							
		·	•							
		Mountain V	iew, CA 94043							
_	DUDDOCE				(h)	Description				_
	PURPOSE OF		ee Categories listed at the top of this	schedule)	(D)	Description Check if travel of	nutsi	de of Teyas, Com	plete Schedule T.	
	EXPENDITURE	Office Over	head/Rental Expense			=		officeholder living		
						Online storag	je			
	Complete ONLY if direct		iceholder name	Office sou	ght			Office he	eld	_
	expenditure to benefit C/OI	4								
	Date	Payee name								=
	04/03/2025	Google								
	Amount (\$)	Payee addre	ess; City; Sta	ite; Zip Co	de					-
	\$2.12	1	nitheatre Parkway	, _,, -,,						
	Ψ2.12	10007111161	mirican or animay							
		Mountain V	Sow CA 04042							
			iew, CA 94043	1						_
	PURPOSE OF		ee Categories listed at the top of this	schedule)	(b)	Description	outoi	do of Toyloo Com	plete Schedule T.	
	EXPENDITURE	Office Over	head/Rental Expense			ш		officeholder living	•	
						Online storag			,	
							•			
\vdash	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	ght			Office he	eld	٦
	expenditure to benefit C/O		.		J					
										4
1										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 24/39 Rpt: 53/71	Alexander, Lillian Henny (The Honorable) 00087442
4	Date	5 Payee name
	05/05/2025	Google
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2.12	1600 Amphitheatre Parkway
		Mountain View, CA 94043
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Online storage
		Chinio diorage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
•	expenditure to benefit C/O	
	Date	Dayso nama
	06/03/2025	Payee name Google
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.12	1600 Amphitheatre Parkway
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Online storage
		Offline Storage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	Programme
	Date 02/11/2025	Payee name
		Harris County Civil Courts
	Amount (\$)	Payee address; City; State; Zip Code
	\$14.38	P.O. Box 1525
		Houston, TX 77251
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense Lunch Meeting
		Lunch Meeting
	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 -

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	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: 25/39 Rpt: 54/71	Alexander, Lillian Henny (The Honorable) 00087442
4	Date	5 Payee name
L	05/06/2025	Harris County Civil Courts
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.81	P.O. Box 1525
		Houston, TX 77251
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Coffee meeting
		Control modeling
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
F	Date	Payee name
	05/12/2025	Harris County Civil Courts
H	Amount (\$)	Payee address; City; State; Zip Code
	\$23.75	P.O. Box 1525
		Houston, TX 77251
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Lunch Meeting
		Lanon Weeting
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	06/12/2025	Harris County Civil Courts
H	Amount (\$)	Payee address; City; State; Zip Code
	\$5.07	P.O. Box 1525
		Houston, TX 77251
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense
		Coffee Meeting
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
•	Sch: 26/39 Rpt: 55/71	Alexander, Lillian Henny (The Honorable) 00087442
4	Date	5 Payee name
	03/05/2025	Harris County Democratic Party
6	Amount (\$) \$15.00	7 Payee address; City; State; Zip Code 4619 Lyons Ave.
		Houston, TX 77020
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Sustaining membership contribution
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_	Data	
	Date	Payee name
	04/07/2025	Harris County Democratic Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.00	4619 Lyons Ave.
		Houston, TX 77020
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Sustaining membership contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/05/2025	Harris County Democratic Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.00	4619 Lyons Ave.
		Houston, TX 77020
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Sustaining membership contribution
_	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 Comi

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

	Contributing 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: 27/39 Rpt: 56/71	Alexander, Lillian Henny (The Honorable) 00087442
4	Date	5 Payee name
	06/05/2025	Harris County Democratic Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.00	4619 Lyons Ave.
		Houston, TX 77020
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	LXI LINDITORL	Candidate/Officeholder/Political Committee
		Sustaining membership contribution
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/09/2025	Houston Black American Democrats PAC
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	4806 Edfield St
	φ250.00	4000 Eulielu St
		Houston, TX 77033
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Meeting sponsorship
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experience to benefit eyer	
	Date	Payee name
	03/10/2025	Human Age Digital
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,000.00	2700 Post Oak Blvd, 21st Floor
	+-,	
		Houston, TX 77056
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Digital advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1: Sch: 28/39 Rpt: 57/71	FILER NAME Alexander, Lillian Henny (The Honorable)	3 Filer ID (Ethics Commission Filers) 00087442
4	Date 01/21/2025	5 Payee name Juliet	
6	Amount (\$) \$945.65	7 Payee address; City; State; Zip Code 5857 Westheimer Rd Suite P	
8	PURPOSE OF EXPENDITURE	Houston, TX 77057 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff dinner
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 01/13/2025	Payee name Kiss My Kakes Kobbler & Buns	
	Amount (\$) \$340.00	Payee address; City; State; Zip Code 5444 Westheimer Rd, Ste 1000	
	PURPOSE OF EXPENDITURE	Houston, TX 77056 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Catering for investiture
	Complete ONLY if direct expenditure to benefit C/O	L Candidate/Officeholder name Office sought H	Office held
	Date 02/10/2025	Payee name Kuhl Linscomb	
	Amount (\$) \$464.39	Payee address; City; State; Zip Code 2418 W Alabama St	
		Houston, TX 77098	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office furnishings
	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 Salaries/Wages/Contract Labor

	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: 29/39 Rpt: 58/71	Alexander, Lillian Henny (The Honorable) 00087442
4	Date	5 Payee name
	01/30/2025	Luigi's Pizzeria Houston Pizza
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5.41	3700 Almeda Rd
		Houston, TX 77004
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Dinner meeting
_	0 1: 0 1: 0	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/10/2025	Luigi's Pizzeria Houston Pizza
	Amount (\$)	Payee address; City; State; Zip Code
	\$23.81	3700 Almeda Rd
		Houston, TX 77004
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Young Democrats Meeting
		Today Domostate mooting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/13/2025	Mailchimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$106.60	675 Ponce de Leon Ave NE, Suite 5000
	Ψ100.00	or or office de Leoff Ave IVL, Gaille 3000
		Atlanta, GA 30308
	DUDDOOF	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign email software
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 30/39 Rpt: 59/71	Alexander, Lillian Henny (The Honorable)	00087442
4	Date	5 Payee name	
	01/10/2025	Manuel, Farran	
6	Amount (\$) \$350.00	7 Payee address; City; State; Zip Code 2008 Live Oak St	
		Houston, TX 77003	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Social media and videography for investiture
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	01/22/2025	Manuel, Farran	
	Amount (\$) \$350.00	Payee address; City; State; Zip Code 2008 Live Oak St	
		Houston, TX 77003	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Social media and videography for investiture
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 01/22/2025	Payee name New Edmond, Kendra	
	Amount (\$) \$230.00	Payee address; City; State; Zip Code 3503 Christopher Dr.	
		Missouri City, TX 77459	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Hair and Make up for investiture
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name 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/Political Committee Credit Card Payment		Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission	Filers)
	Sch: 31/39 Rpt: 60/71	Alexander	Lillian Henny (The F	Honorable)				00087442		
4	Date	5 Payee nam	e							
	01/21/2025	Office Dep	ot							
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip C	ode					
	\$124.00	3443 Kirby	Drive							
		Houston, 7	X 77098							
8	PURPOSE	(a) Category (See Categories listed at the top	o of this schedule)	(b)	Description				
	OF EXPENDITURE	I	rhead/Rental Expens			=			plete Schedule T.	
						Office supplie		, officeholder living	g expense	
						Omoc Supplie	,,			
9	Complete ONLY if direct	Candidate/Ot	ficeholder name	Office so	<u>l</u> uaht			Office he	eld	
	expenditure to benefit C/OI				9					
F	Date	Payee name								
	01/21/2025	Office Dep								
	Amount (\$)	Payee addr	ess; City;	State; Zip C	ode					
	\$12.45	3443 Kirby	Drive							
		Houston, 7	X 77098							
	PURPOSE	(a) Category (See Categories listed at the top	o of this schedule)	(b)	Description				
	OF EXPENDITURE	Office Ove	rhead/Rental Expen	se		=			plete Schedule T.	
					Check if Austin, TX, officeholder living expense Office supplies					
						Описс Заррис	,,,			
Complete ONLY if direct Candidate/O			ficeholder name	Office so	<u>l</u> ught			Office he	eld	
	expenditure to benefit C/OI	Н			J					
F	Date	Payee nam	<u> </u>							
	01/21/2025	Office Dep								
	Amount (\$)	Payee addr	ess; City;	State; Zip C	ode					
	\$77.92	3443 Kirby								
		Houston, 7	X 77098							
	PURPOSE	(a) Category	See Categories listed at the top	o of this schedule)	(b)	Description				
	OF EXPENDITURE		rhead/Rental Expens			Check if travel			plete Schedule T.	
	LAFENDITORE							, officeholder living	g expense	
						Office supplie	55			
\vdash	Complete ONLY if direct	Candidate/Ot	ficeholder name	Office so	lapt			Office he	hle	
	expenditure to benefit C/OI			Jilioc 301	-gin			Omoc m	···	
\vdash										
ᆫ										

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 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: 32/39 Rpt: 61/71	Alexander, Lillian Henny (The Honorable) 00087442
4	Date	5 Payee name
	01/13/2025	OfficeMax
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$196.69	1576 W Gray St
		Houston, TX 77019
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office supplies
		Office supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	Dayso nama
	01/16/2025	Payee name Pour Me Perfection
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,425.00	801 Travis St Ste 2101
L		Houston, TX 77002
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Bartending for investiture
		Daite liding for investiture
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	Payee name
	01/21/2025	Quincy Bates Productions
L		Payee address; City; State; Zip Code
	Amount (\$) \$600.00	2858 Southmore Blvd
	φουο.υυ	2000 Southinore blvu
		Harrison TV 77004
L		Houston, TX 77004
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if traval outside of Taxas, Complete Schedule T
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Band for investiture
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	
Г		
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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: 33/39 Rpt: 62/71	Alexander, Lillian Henny (The Honorable) 00087442
4	Date	5 Payee name
	03/17/2025	Sanguine Portraiture
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$108.25	4215 Astoria Manor Ln
		Fulshear, TX 77441
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign photography
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	05/12/2025	Sanguine Portraiture
H	Amount (\$)	Payee address; City; State; Zip Code
	\$54.13	4215 Astoria Manor Ln
		Fulshear, TX 77441
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign photography
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/03/2025	Smith, Shea Jordan
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$3,000.00	1755 Wyndale St Apt 515
		Houston, TX 77030
	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 Public relations for campaign
		Fubilic relations for campaign
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

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 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
	Sch: 34/39 Rpt: 63/71	Alexander, Lillian Henny (The Honorable) 00087442		
4	Date	5 Payee name		
	01/13/2025	Spike The Photographer		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$750.00	3515 W. Dallas St.		
		Houston, TX 77019		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense Photography for investiture		
		Thotography for invocataro		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/O			
	Date	Payee name		
	06/04/2025	Texas Center for the Judiciary		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$350.00	4900 Fournace PI #200		
		Bellaire, TX 77401		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.		
	EXI ENDITORE	Check if Austin, TX, officeholder living expense		
		Dues payment		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/O	y		
	Date	Payee name		
	06/16/2025	Tommy's Seafood Restaurant & Oyster Bar		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$82.07	2555 Bay Area Blvd		
	402.0 .	2000 2dy / 10d 2.1d		
		Houston, TX 77058		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Check if Austin, TX, officeholder living expense		
		Judges Dinner		
	Complete ONLY if direct expenditure to benefit C/Ol	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 Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete	e this form.
1	Total pages Schedule F1: Sch: 35/39 Rpt: 64/71	FILER NAME Alexander, Lillian Henny (The Honorable)	3 Filer ID (Ethics Commission Filers) 00087442
4	Date 04/21/2025	5 Payee name Treebirds	
6	Amount (\$) \$162.00	7 Payee address; City; State; Zip Code 1117 Texas St	
8	PURPOSE OF EXPENDITURE	Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff lunch
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 06/16/2025 Amount (\$) \$4.00	Payee name University of Houston Clear Lake Payee address; City; State; Zip Code 2700 Bay Area Boulevard	
	PURPOSE	Houston, TX 77058	
	OF EXPENDITURE	Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Parking to see The Jury
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 01/23/2025	Payee name Vic Auto Repair	
	Amount (\$) \$550.00	Payee address; City; State; Zip Code 17545 Kuykendahl Rd B	
		Spring, TX 77379	
	PURPOSE OF EXPENDITURE	Transportation Equipment And Related Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense nadvertent charge - funds replaced July 2025
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ense Event Expense Loan Repayment/Reimbu

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

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

	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: 36/39 Rpt: 65/71	Alexander, Lillian Henny (The Honorable) 00087442
4	Date	5 Payee name
l	05/28/2025	Vonlane
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	1200 Louisiana St
l		
l		Houston, TX 77002
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Travel In District Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		Travel to conference
L		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
┕		
l	Date	Payee name
L	01/09/2025	Walmart
l	Amount (\$)	Payee address; City; State; Zip Code
l	\$31.52	111 Yale Street
l		
l		Houston, TX 77007
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l		Office supplies
l		Cinido dappindo
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
l	expenditure to benefit C/OI	
F	Date	Payee name
l	05/29/2025	Walmart
┝	Amount (\$)	Payee address; City; State; Zip Code
l	\$96.96	111 Yale Street
l	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
l		Houston, TX 77007
⊢	PURPOSE	I m
l	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		Office supplies
L		
	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 Commit

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 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: 37/39 Rpt: 66/71	Alexander, Lillian Henny (The Honorable) 00087442
4	Date	5 Payee name
	01/22/2025	White, Evan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	21118 N. Fair Ct
		Houston, TX 77073
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign photography
		Campaign photography
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	04/28/2025	White, Evan
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	21118 N. Fair Ct
		Houston, TX 77073
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign photography
		Campaigh photography
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Data	
	Date	Payee name
	01/16/2025	Wix.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.98	100 Gansevoort Street
		New York, NY 10014
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign website
		Campaign website
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee 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 Credit Card Payment	ll 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: 38/39 Rpt: 67/71	Alexander, Lillian Henny (The Honorable) 00087442
4	Date	5 Payee name
	02/18/2025	Wix.com
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$25.98	100 Gansevoort Street
		New York, NY 10014
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign website
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/17/2025	Wix.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.98	100 Gansevoort Street
		New York, NY 10014
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign website
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	04/16/2025	Wix.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.98	100 Gansevoort Street
		New York, NY 10014
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign website
		Sampaign nobolic
	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

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

	Credit Card Payment	The Instruction Guide explains how to cor	•	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 39/39 Rpt: 68/71	Alexander, Lillian Henny (The Honorable)		00087442
4	Date	5 Payee name		·
	05/16/2025	Wix.com		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$25.98	100 Gansevoort Street		
		New York, NY 10014		
8	PURPOSE	,	(b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Į	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			L	Campaign website
				Campaign 110251.0
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	thr	Office held
ľ	expenditure to benefit C/OI		9	0.1100 1.5.0
⊨	Date	Davis name		
	06/16/2025	Payee name Wix.com		
			al a	
	Amount (\$)	Payee address; City; State; Zip Coo	ue	
	\$25.98	100 Gansevoort Street		
		New York, NY 10014		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Office Overhead/Rental Expense	ļ	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			L	Campaign website
				Campaign woodle
_	Complete ONLY if direct	Candidate/Officeholder name Office sou	thr	Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·	9	omos nou

PURCHASE OF INVESTMENTS FROM POLITICAL SCHEDULE F3 **CONTRIBUTIONS** 1 Total pages Schedule F3: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 69/71 FILER NAME 3 Filer ID (Ethics Commission Filers) Alexander, Lillian Henny (The Honorable) 00087442 Name of person from whom investment is purchased 03/28/2025 Veritex Bank 6 Address of person from whom investment is purchased; City; State; Zip Code 5111 San Felipe St Houston, TX 77056 Description of investment Purchase of 6 month Certificate of Deposit 8 Amount of investment (\$) 115,000.00

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: 70/71 2 FILER NAME Filer ID (Ethics Commission Filers) Alexander, Lillian Henny (The Honorable) 00087442 8 Amount (\$) Date 5 Name of person from whom amount is received 02/06/2025 **Constant Contact** \$85.28 6 Address of person from whom amount is received; City; State; Zip Code Waltham, MA 02451 Purpose for which amount is received Check if political contribution returned to filer Refund Name of person from whom amount is received Amount (\$) Date 01/14/2025 Texas Center for the Judiciary \$1,209.64 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78701 Purpose for which amount is received Check if political contribution returned to filer Refund Date Name of person from whom amount is received Amount (\$) 06/27/2025 Veritex Bank \$1,215.22 Address of person from whom amount is received; City; State; Zip Code Houston, TX 77056 Purpose for which amount is received Check if political contribution returned to filer CD interest earned

TEXT ANNOTATION	
	Sch: 1/1 Rpt: 71/71
FILER NAME Alexander, Lillian Henny (The Honorable)	Filer ID (Ethics Commission Filers) 00087442
Schedule K	
Information entered by filer as a memo:	