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) 00089706 40 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mrs. Argie D. NAME Date Received **ELECTRONICALLY FILED** 07/15/2025 NICKNAME LAST **SUFFIX** Brame CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Byron W. NAME NICKNAME LAST **SUFFIX** Brame **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** (773) 704-2331 **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 03/03/2026 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 434th Assoc Fort Bend District Judge District 268th

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 40

13 C / OH NAME	Brame , Argie D. (Mrs	5.)	14 Filer ID 00089706	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without officeholders are required to report this informatio	the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS(OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	IS)	\$ 44,744.57
EXPENDITURE TOTALS	3. TOTAL UNITEM	\$ 0.00		
	4. TOTAL POLIT	CAL EXPENDITURES		\$ 13,553.25
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 32,891.32
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 4,500.00
17 AFFIDAVIT	•			•
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
		Mrs	s. Argie D. Brame	
		Signature of	f Candidate or Officehol	lder
AFFIX NO	TARY STAMP / SEAL AB	DVE		
		aid	, this the	day
of	, 20, to co	ertify which, witness my hand and seal of office.		
Signature of office	cer administering oath	Printed name of officer administering oath	Title of office	r administering oath

SUBTOTALS - JC/OH

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

				3 of 40				
18 FILER NAME Brame , Argie D.	8 FILER NAME 19 Filer ID Brame , Argie D. (Mrs.) 00089706							
	0 SCHEDULE SUBTOTALS NAME OF SCHEDULE							
1. X SCHEI	DULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	41,944.57				
2. X SCHEI	DULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	2,800.00				
3. X SCHEI	DULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	1,000.00				
4. X SCHEI	\$	4,500.00						
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS				13,553.25				
6. SCHEI	DULE F2: UNPAID INCURRED OBLIGATIONS		\$					
7. SCHEI	DULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$					
8. SCHEI	DULE F4: EXPENDITURES MADE BY CREDIT CARD		\$					
9. SCHEI	DULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$					
10. SCHEI	DULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$					
11. SCHEI	DULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$					
12. SCHEI	\$							
			•					

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	1 Total pages Schedule A(J)1: Sch: 1/22 Rpt: 4/40		
2	FILER NAME Brame , Argi				3 Filer ID (Ethics Commission Filers) 00089706
4	Date 06/30/2025			7 Amount of Contribution (\$) \$5,000.00	
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	1
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	pouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if a	any)	<u> </u>	
	Date Full name of contributor out-of-state PAC (ID#:) O5/12/2025 Amaro Law Firm Contributor address; City; State; Zip Code Houston, TX 77008		Amount of Contribution (\$) \$1,500.00		
	Contributor's I	Principal Occupation		Contributor's Job Title	1
	Contributor's e	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor is	s a child, law firm of parent(s) (if a	any)		
	Date 06/17/2025	Full name of contributor Aziz Trial Law Contributor address; City; Si Houston, TX 77008	out-of-state PAC (ID#:_		Amount of Contribution (\$)
	Contributor's I	I Principal Occupation		Contributor's Job Title	I
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor is	s a child, law firm of parent(s) (if a	any)		

	MONET	ARY POLITICAL CO	NTRIBUTIC	ONS	S	CHEDULE A	(J)1
	The Instru	ction Guide explains how to	complete this f	orm.	1 Total pages Sch: 2/22 F	Schedule A(J)1: Rpt: 5/40	
2	FILER NAME Brame , Argi	ie D. (Mrs.)			3 Filer ID (Et 00089706	thics Commission	Filers)
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Bobrick, Williams (Mr.) 6 Contributor address; City; State; Zip Code Sugar Land, TX 77498		7 Amount of C	ontribution (\$)	\$53.03		
8	Contributor's F	Principal Occupation		9 Contributor's Job Title			
	Supervisor			Department Supervisor			
10	10 Contributor's employer/law firm		oouse (if any)				
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 C	ontribution (\$)	
	06/17/2025 Borow, Hilary Contributor address; City; State; Zip Code Houston, TX 77008				· · · · · · · · · · · · · · · · · · ·	\$500.00	
	Contributor's I	I Principal Occupation		Contributor's Job Title			
	Attorney			Partner			
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if any)		
	Shackelford	McKinley & Norton LLP					
	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 C	ontribution (\$)	
	06/30/2025	Brame, Jon Contributor address; City; State; Sugar Land, TX 77479	; Zip Code				\$443.76
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Sales Director Field Service						
	Contributor's employer/law firm Law firm of contributor's sp			oouse (if any)			
	Coca-Cola	• •			(),		
	If contributor is	s a child, law firm of parent(s) (if 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: 3/22 Rpt: 6/40
2	FILER NAME	(a. D. (Mara.)			3	Filer ID (Ethics Commission Filers)
	Brame , Argi				╙	00089706
4	Date 06/30/2025	5 Full name of contributorBrame, Lois6 Contributor address; City; \$	out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$400.00
		Sugar Land, TX 77479				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
	Retired			Retired		
10	O Contributor's employer/law firm Retired 11 Law firm of contributor's sp			oous	se (if any)	
12		s a child, law firm of parent(s) (if	anv)			
	. Il continuator i	o a crima, law iiriri or parcria(e) (ii	cary)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/17/2025	Brawley, Lisa	_			\$527.46
		Contributor address; City; S Rosenberg, TX 77469	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Court Coord			Substitute Court Coordi	nat	or
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Fort Bend C					
	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 (\$)
	05/02/2025	Broussard, Andrew				\$105.75
		Contributor address; City; S Houston, TX 77024				
\vdash	Contributor's	Principal Occupation		Contributor's Job Title		
	Student	molpai Gecapation		N/A		
		employer/law firm		Law firm of contributor's sp	oous	se (if anv)
	N/A					,,
	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: 4/22 Rpt: 7/40
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Brame , Argi	e D. (Mrs.)				00089706
4	Date 06/13/2025	5 Full name of contributor Broussard, Tameka6 Contributor address; City; S	out-of-state PAC (ID#:			Amount of Contribution (\$) \$500.00
		Manvel, TX 77578				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Physician			Physician		
10		employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
_	Self employe		A			
12	IT CONTRIBUTOR IS	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Т	Amount of Contribution (\$)
	06/09/2025	Cantu, Jennifer	_ \	·		\$26.67
		Contributor address; City; S Richmond, TX 77469	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Therapist			Therapist		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	ECI					
	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 (\$)
	06/17/2025	Chapoton Sanders Scart	oorough, LLP			\$250.00
		Contributor address; City; S Houston, TX 77024	State; Zip Code			
-	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor 3 i	тпораг Оссираноп		Contributor 3 30b 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	any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	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: 5/22 Rpt: 8/40
2	FILER NAME	in D. (Marc.)			3	Filer ID (Ethics Commission Filers)
4	Date 05/12/2025	Full name of contributor Cone, PLLC Contributor address; City;	out-of-state PAC (ID#:_)	7	00089706 Amount of Contribution (\$) \$2,500.00
8	Contributor's I	Houston, TX 77007 Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	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 (\$)
	06/25/2025	Dafnis, Bill (Dr.) Contributor address; City;	State; Zip Code			\$200.00
		Cave Creek, TX 85331				
	Contributor's Physician	Principal Occupation		Contributor's Job Title Family Medicine Doctor	_	
_		employer/law firm		Law firm of contributor's sp		co (if any)
	Self employe			Law iiiii or contributor 3 3	Jou	se (ii diiy)
		s a child, law firm of parent(s) (i	f any)	L		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/19/2025 Demos, Lisa Contributor address; City; State; Zip Code Chicago, TX 60661			\$53.04		
Н	Contributor's I	rincipal Occupation		Contributor's Job Title		
	Therapist			Licensed Clinical Profes	ssic	onal Counselor
	Contributor's employer/law firm Law firm of contributor's sp			oous	se (if any)	
	Self employe	ed				
	If contributor is	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 f	form.	1	Total pages Schedule A(J)1: Sch: 6/22 Rpt: 9/40
2	FILER NAME Brame , Argi	ie D. (Mrs.)			1	Filer ID (Ethics Commission Filers) 00089706
4	Date 06/20/2025	5 Full name of contributorElliott Law Office6 Contributor address; City;	out-of-state PAC (ID#:_		7	Amount of Contribution (\$) \$1,000.00
		Rosenberg, TX 77471				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oouse	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#:) 05/13/2025 Ellis, Donna (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$105.75		
		Sugar Land, TX 77498				
	Contributor's F	Principal Occupation		Contributor's Job Title	•	
	Retired			Retired		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oouse	e (if any)
	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 (\$)
	05/13/2025	Foster Yarborough PLL0	_			\$1,000.00
		Contributor address; City;	State; Zip Code		•	
		Houston, TX 77002				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse	e (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	<u> </u>		

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J))1
	The Instru	ction Guide explains how	1 Total pages Schedule A(J)1: Sch: 7/22 Rpt: 10/40			
2	FILER NAME Brame , Argi				3 Filer ID (Ethics Commission File 00089706	rs)
4	Date 5 Full name of contributor out-of-state PAC (ID#:) 7 05/17/2025 Freund, Cynthia 6 Contributor address; City; State; Zip Code Wheaton, IL 60189		7 Amount of Contribution (\$) \$2	63.89		
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
	Retired			Retired		
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	pouse (if any)	
12	If contributor is	s a child, law firm of parent(s) (if an	y)			
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
	05/13/2025	Garza, Clayton Contributor address; City; Sta Rosharon , TX 77583	te; Zip Code		<u></u>	53.03
	Contributor's F	I Principal Occupation		Contributor's Job Title		
		bation Officer		Juvenile Probation Offic	cer	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)	
	Fort Bend C	ounty				
	If contributor is	s a child, law firm of parent(s) (if an	y)			
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
	05/13/2025	Gerke Law Firm Contributor address; City; Sta Sugar Land, TX 77479	te; Zip Code		 *5	00.00
	Contributor's I	Principal Occupation		Contributor's Job Title	1	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if an	у)			

	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: 8/22 Rpt: 11/40
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Brame , Argi	e , Argie D. (Mrs.)				00089706
4	Date 05/13/2025	5 Full name of contributor Gibson, Mark6 Contributor address; City;	out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$50.00
		Houston, TX 77048				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	_	
	Funeral Ope	rator		President		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
	Haven Mem	orial				
12	! If contributor i	s a child, law firm of parent(s) (if	any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/29/2025	Halperin, Melissa Contributor address; City;				\$105.75
		Highland Park, TX 6003	5 			
		Principal Occupation		Contributor's Job Title		
	Attorney			Associate General Cou	nse	el
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Culligan Inte	rnational Company				
	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 (\$)
	05/13/2025	Hanson, Michael				\$211.18
		Contributor address; City; Sugar Land, TX 77498	State; Zip Code			
\vdash	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Attorney			Senior Counsel		
	Contributor's employer/law firm Law firm of contributor's sp			oous	se (if any)	
	Varghese Su					. ,
	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: 9/22 Rpt: 12/40
2	FILER NAME Brame , Argi	ia D. (Mrs.)			3	Filer ID (Ethics Commission Filers) 00089706
4	Date 05/13/2025	5 Full name of contributor Harris, Ariel6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$500.00
		Houston, TX 77090				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Attorney			Managing Partner		
10		employer/law firm of AMH PLLC		11 Law firm of contributor's sp	oou	se (if any)
12		s a child, law firm of parent(s) (i	f any)			
_	Data	Full name of contributor		,	-	Amount of Contribution (\$)
	Date Full name of contributor out-of-state PAC (ID#:) 06/28/2025 Hawkins, Katrina Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$250.00		
		Arlington, VA 22207		1		
		Principal Occupation		Contributor's Job Title		
	Physician			Intensivist		on the sun of
	George Was	employer/law firm		Law firm of contributor's sp	oou	se (if any)
			family			
	ii contributor ii	s a child, law firm of parent(s) (i	rany)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/13/2025	Heppard, Janet	_			\$150.00
		Contributor address; City;	State; Zip Code			
		Katy, TX 77494				
		Principal Occupation		Contributor's Job Title		
	Professor			Professor		
		employer/law firm		Law firm of contributor's sp	oou	se (if any)
		Houston Law Center				
	if contributor is	s a child, law firm of parent(s) (i	r any)			

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total pages Schedule A(J)1: Sch: 10/22 Rpt: 13/40
2	FILER NAME Brame , Argi	io D. (Mrc.)			3	Filer ID (Ethics Commission Filers) 00089706
4	Date 06/17/2025	Full name of contributor Hood, Lori Contributor address; City; St	out-of-state PAC (ID#:_		7	Amount of Contribution (\$) \$263.90
		Houston, TX 77019				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Partner		
10		employer/law firm McKinley & Norton Ilp		11 Law firm of contributor's sp	oous	se (if any)
12	2 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 (\$)
	05/13/2025	Hunt Law Firm Contributor address; City; S				\$500.00
		Weston Lakes, TX 77441		1		
	Contributor's I	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 a	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)
	05/13/2025	Jammy Kiggundu Attorne Contributor address; City; Si Houston, TX 77057				\$500.00
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	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)	l		

	MONET	ARY POLITICAL CO	ONTRIBUTIO	ONS		SCHEDULE F	\(J)1
	The Instru	ction Guide explains how t	o complete this f	orm.	1	es Schedule A(J)1: 22 Rpt: 14/40	
2	FILER NAME Brame , Arg				3 Filer ID 0008970	(Ethics Commissio	n Filers)
4	Date 06/23/2025	5 Full name of contributor Jenkins, Karen6 Contributor address; City; StateSugar Land, TX 77498	out-of-state PAC (ID#:_ e; Zip Code		7 Amount o	f Contribution (\$)	\$103.90
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
	Retired			Retired			
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	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 o	f Contribution (\$)	
	05/15/2025	Klitsas, Loren Contributor address; City; State Spring, TX 77379	e; Zip Code				\$500.00
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Attorney	····o·pai o ocapation		Managing Partner			
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if any)		
	Klitsas & Ve	rcher Law 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 o	f Contribution (\$)	
	05/13/2025	LAW OFFICE OF JIM ALAN Contributor address; City; State					\$500.00
		Richmond, TX 77469					
	Contributor's I	I Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)		
	If contributor i	s a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL CONTRIBUT	TONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete th	is form.	1 Total pages Schedule A(J)1: Sch: 12/22 Rpt: 15/40
2	FILER NAME Brame , Argi			3 Filer ID (Ethics Commission Filers) 00089706
4	Date 06/24/2025	 Full name of contributor out-of-state PAC (I Law Office of Annie Scott Contributor address; City; State; Zip Code Barker, TX 77413 	D#:)	7 Amount of Contribution (\$) \$50.00
8	Contributor's I	I Principal Occupation	9 Contributor's Job Title	
10	Contributor's	employer/law firm	11 Law firm of contributor's s	pouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (I	D#·)	Amount of Contribution (\$)
	05/13/2025	Law Office of Joe Mathew PLLC Contributor address; City; State; Zip Code Houston, TX 77008		\$2,500.00
	Contributor's I	Principal Occupation	Contributor's Job Title	
	Continuator 3 i	The par Occupation	Contributor 3 30b Title	
	Contributor's 6	employer/law firm	Law firm of contributor's s	pouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (I	D#:)	Amount of Contribution (\$)
	05/13/2025	Law Office of Omar Khawaja PLLC Contributor address; City; State; Zip Code Houston, TX 77056		\$1,500.00
	Contributor's I	Principal Occupation	Contributor's Job Title	
	Contributor's e	employer/law firm	Law firm of contributor's s	pouse (if any)
	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	ow to complete this	form.	1	ages Schedule A(J)1: 3/22 Rpt: 16/40	
2	FILER NAME Brame , Argi	ie D (Mrs.)			3 Filer ID 00089	(Ethics Commission Filers)	
4	Date 06/25/2025	5 Full name of contributor Lee, John 6 Contributor address; City;	out-of-state PAC (ID#:)		of Contribution (\$) \$1,000	.00
		Houston, TX 77008					
8		Principal Occupation		9 Contributor's Job Title			
	Engineer IT Engineer						
10	10 Contributor's employer/law firm Shell Shell			oouse (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#:)	Amount	of Contribution (\$)	_
	05/18/2025	Levy, Rachael Contributor address; City;	State; Zip Code			\$50	.00
		Houston, TX 77098					
		Principal Occupation		Contributor's Job Title			
	Attorney			Partner			
		employer/law firm		Law firm of contributor's sp	oouse (if any)	
	RG Levy Lav		fond				
	ii continuator i	s a child, law firm of parent(s) (i	i airy)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount	of Contribution (\$)	
	05/15/2025	Maag, Stacy				\$53	.03
		Contributor address; City; Katy, TX 77494					
	Contributor's F	Principal Occupation		Contributor's Job Title			
	Massage Th	·		Licensed Massage The	rapist		
Contributor's employer/law firm Law firm of contributor's spo		oouse (if any)				
	Self Employe	ed					
	If contributor is	s a child, law firm of parent(s) (i	f any)	•			

	MONET	ARY POLITICAL (CONTRIBUTIO	DNS	SCH	HEDULE A	(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Sc Sch: 14/22 R		
2	FILER NAME Brame , Argi				3 Filer ID (Ethic	s Commission	Filers)
4	Date 06/02/2025	5 Full name of contributor MacNaughton, J. Robert6 Contributor address; City; StHouston, TX 77009	out-of-state PAC (ID#:_)	7 Amount of Con	tribution (\$)	\$263.89
8	Contributor's F	Principal Occupation		9 Contributor's Job Title			
	Attorney			Attorney			
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	oouse (if any)		
12	If contributor is	s a child, law firm of parent(s) (if a	nny)	L			
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Con	tribution (\$)	
	05/14/2025	Markowitz, Eliz Contributor address; City; St Katy, TX 77494					\$105.75
	Contributor's I	Principal Occupation		Contributor's Job Title	1		
	Educator	····opai o ooupaio.		Adjunct Professor			
		employer/law firm		Law firm of contributor's sp	oouse (if anv)		
	University of			,	, ,,		
		s a child, law firm of parent(s) (if a	nny)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Con	tribution (\$)	
	06/13/2025	Martinez, John Contributor address; City; St Rosenberg, TX 77469	ate; Zip Code				\$105.75
	Contributor's I	Principal Occupation		Contributor's Job Title	•		
	Law Enforce	ement		Deputy			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)		
	Fort Bend C	ounty					
	If contributor is	s a child, law firm of parent(s) (if a	nny)				

	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: 15/22 Rpt: 18/40
2	FILER NAME Brame , Argi	e D. (Mrs.)			1	Filer ID (Ethics Commission Filers) 00089706
4	Date 06/01/2025	5 Full name of contributor McCardle, Gregory6 Contributor address; City;	out-of-state PAC (ID#:)	_	Amount of Contribution (\$) \$211.18
		Texas City, TX 77568				
8		Principal Occupation		9 Contributor's Job Title		
	Engineer			Cyber Security Enginee		
10	10 Contributor's employer/law firm NASA 11 Law firm of contributor's sp			oous	e (if any)	
12	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 (\$)
	05/13/2025	Nguyen, Peter Contributor address; City;	State; Zip Code			\$2,500.00
		Houston, TX 77092				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Senior Counsel		
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Arena Energ					
	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 (\$)
	05/13/2025	O'Neal, Byron				\$105.75
		Contributor address; City; Significant City; Significant City, TX 77489	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Assistant County Attorn	iey	
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Fort Bend C	ounty				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL C	ONTRIBUTIO	DNS		SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A(J)1: Sch: 16/22 Rpt: 19/40
2	FILER NAME Brame , Argi	e D. (Mrs.)			3	Filer ID (Ethics Commission Filers) 00089706
4	Date 06/23/2025	 5 Full name of contributor Pathak, Neeran 6 Contributor address; City; Sta 	out-of-state PAC (ID#:_ ate; Zip Code)	7	Amount of Contribution (\$) \$105.75
		Richmond, TX 77407				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title Trader		
10		employer/law firm		11 Law firm of contributor's sp	00119	se (if any)
"	ConocoPhilli			Law iiiii or contributor 3 3,	,ou	se (ii uliy)
12	If contributor is	s a child, law firm of parent(s) (if a	ny)			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)
	06/17/2025	Ramey Chandler Schein, F Contributor address; City; Sta Houston, TX 77057			•	\$250.00
H	Contributor's F	Principal Occupation		Contributor's Job 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	ny)	<u> </u>		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)
	05/13/2025	Richard Tate, Attorney at I Contributor address; City; Sta Texas, TX 77469				\$2,636.06
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's 6	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if a	ny)			

	MONET	ARY POLITICAL CONTRIBUT	ΓIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete th	is form.	1 Total pages Schedule A(J)1: Sch: 17/22 Rpt: 20/40
2	FILER NAME Brame , Argi			3 Filer ID (Ethics Commission Filers) 00089706
4	Date 05/13/2025	5 Full name of contributor out-of-state PAC (I Robak, Marianne 6 Contributor address; City; State; Zip Code Houston, TX 77094	ID#:)	7 Amount of Contribution (\$) \$263.89
8	Contributor's I	Principal Occupation	9 Contributor's Job Title	1
	Attorney		Partner	
10		employer/law firm , McKinley & Norton, LLP	11 Law firm of contributor's	spouse (if any)
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 (\$)
	06/17/2025	Robak, Marianne Contributor address; City; State; Zip Code Houston, TX 77094		\$1,000.00
	Contributor's I	Principal Occupation	Contributor's Job Title	
	Attorney		Partner	
	Contributor's	employer/law firm	Law firm of contributor's	spouse (if any)
	Shackelford	McKinley & Norton LLP		
	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (I	ID#:)	Amount of Contribution (\$)
	05/13/2025	Scott Callahan & Associates Contributor address; City; State; Zip Code		 \$527.46
	Cambrilandada	Katy, TX 77494	Constributorio Joh Titlo	
	Contributors	Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's	spouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this 1	form.	1	Total pages Schedule A(J)1: Sch: 18/22 Rpt: 21/40
2	FILER NAME Brame , Argi	ie D. (Mrs.)			3	Filer ID (Ethics Commission Filers) 00089706
4	Date 05/13/2025	5 Full name of contributor Segura, Donna6 Contributor address; City; S	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$200.00
		Richmond, TX 77469				
8		Principal Occupation		9 Contributor's Job Title		
	Bail Bondsp			Bail Bond Manager		
10		employer/law firm onzalez Bail Bonds		11 Law firm of contributor's sp	oous	se (if any)
12		s a child, law firm of parent(s) (if	any)	l		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)
	06/27/2025	Shanahan, Jack Contributor address; City; S	State; Zip Code			\$105.75
		Summerville, SC 29486		1		
	Contributor's Retired	Principal Occupation		Contributor's Job Title		
L		omployor/low firm		Retired	2011	oo (if on)
	Retired	employer/law firm		Law firm of contributor's sp	Jou	se (II dily)
	If contributor is	s a child, law firm of parent(s) (if	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)
	05/12/2025	Showalter, Colgin & Dav	is, PLLC			\$1,000.00
		Contributor address; City; S Richmond, TX 77406	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	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	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 19/22 Rpt: 22/40	
2	FILER NAME Brame , Argi	ie D. (Mrs.)			3	Filer ID (Ethics Commissio 00089706	n Filers)
4	Date 05/13/2025	5 Full name of contributor Stone, Trey (Mr.) 6 Contributor address; City;	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$105.75
		Houston, TX 77081					
8		Principal Occupation		9 Contributor's Job Title			
	Attorney			Capital Partner			
10		employer/law firm	D	11 Law firm of contributor's sp	oous	se (if any)	
12		Soggan Blair & Sampson, LL s a child, law firm of parent(s) (ii					
12	in continuator is	s a cilliu, law litti oi paretii(s) (ii	any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
	05/13/2025	Terry & Thweatt, P.C.					\$1,000.00
		Contributor address; City; Houston, TX 77009	State, Zip Code				
	Contributor's F	I 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) (i	any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	05/13/2025	The Hadi Law Firm					\$1,000.00
		Contributor address; City; Housto, TX 77036					
-	Contributor's F	Principal Occupation		Contributor's Job 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	any)	<u> </u>			

	MONET	ARY POLITICAL	CONTRIBUTIO	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: 20/22 Rpt: 23/40
2	FILER NAME Brame , Argi	ie D. (Mrs.)			3	Filer ID (Ethics Commission Filers) 00089706
4	Date 05/13/2025	5 Full name of contributor The Law Office of Eddie 6 Contributor address; City; 9			7	Amount of Contribution (\$) \$250.00
		Houston, TX 77001				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	05/13/2025	The Law Offices of Mario Contributor address; City; S Katy, TX 77494	A Martinez, PLLC			\$1,054.61
_	Contributor's I	<u> </u>		Contributor's Job Title		
	Contributors	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#:)	Π	Amount of Contribution (\$)
	05/12/2025	The Leon Law Firm	_			\$1,500.00
		Contributor address; City; S Sugar Land, TX 77478	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributors	-micipal Occupation		Continuator 5 300 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)			

	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: 21/22 Rpt: 24/40
2	FILER NAME Brame , Argi	ie D (Mrs.)			3	Filer ID (Ethics Commission Filers) 00089706
4	Date 05/14/2025	5 Full name of contributor	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$100.00
		Sugar Land, TX 77478				
8		Principal Occupation		9 Contributor's Job Title		
	Administrativ			Administrative Assistan		
10	Contributor's e City of Hous	employer/law firm ton		11 Law firm of contributor's sp	oous	se (if any)
12		s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/13/2025	Trey Barton Law Contributor address; City;	State; Zip Code			\$527.46
		Sugar Land, TX 77478		T		
	Contributor's I	Principal Occupation		Contributor's Job 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) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/13/2025	Tu, Paul				\$369.32
		Contributor address; City; Richmond, TX 77469	State; Zip Code			
	Contributor's F	rincipal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Partner		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Arrington, Tu	u & Burnett				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

MONE	TARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
The Instru	uction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 22/22 Rpt: 25/40
2 FILER NAME Brame , Arç	≣ gie D. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089706
4 Date 05/12/2025	 Full name of contributor		7 Amount of Contribution (\$) \$2,636.06
	Katy, TX 77494		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor	is a child, law firm of parent(s) (if any)	1	

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: 26/40 3 Filer ID (Ethics Commission Filers) FILER NAME 00089706 Brame , Argie D. (Mrs.) \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 06/28/2025 Dibrell & Associates \$2,500.00 Video Production 7 Contributor address; City; State; Zip Code Katy, TX 77494 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor Amount of In-kind contribution out-of-state PAC (ID#: contribution (\$) description 05/22/2025 Quincy, Patrick \$300.00 Golf tournament Contributor address; City; State; Zip Code sponsorship Richmond, TX 77469 Check if travel outside of Texas. Complete Schedule T. (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Constable Constable Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Fort Bend County If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

PLEDGE	CONTRIBUTIONS (JUDI	CIAL)		SCHEDULE B(J)	
The Inst	truction Guide explains how to com	1 Total pages Schedule B(J): Sch: 1/1 Rpt: 27/40			
2 FILER NAME Brame , Argie D	. (Mrs.)		3 Filer ID (EI 00089706	hics Commission Filers)	
4 TOTAL OF UN	NITEMIZED PLEDGES			\$ 0.00	
5 Date 06/18/2025	6 Full name of pledgor out-of-state PAC (Shackelford, McKinley & Norton, LLP 7 Pledgor Address; City; State;		8 Amount of pledge (\$) \$1,000.00	9 In-kind description (If applicable) Pledged donation.	
	Houston, TX 77002		Check if travel ou	ı ıtside of Texas. Complete Schedule T.	
10 Pledgor's principa	al occupation	11 Pledgor's job title			
12 Pledgor's employe	er/law firm	13 Law firm of pledgo	r's spouse (if any)		
14 If pledgor is a chil	d, law firm of parent(s) (if any)	I			

	LOANS (J	UDICIAL)			SCHEDULE E(J)			
	The Instruction	n Guide explains how to complete this f	orm.	1 Total pages Schedule E(J): Sch: 1/1 Rpt: 28/40				
2	FILER NAME Brame , Argie D	. (Mrs.)		3 Filer ID 00089	(Ethics Commission Filers)			
4	TOTAL OF UN	IITEMIZED LOANS			\$			
5	Date of loan 01/12/2025	7 Name of lender out-of-state PA Brame, Byron	C (ID#:)	9 Loan Amount (\$) \$4,500.00			
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate			
	No	REDACTED PER 254.0313, GOV'T CO	DDE	11 Maturity Date				
12	Lender's Principal	Occupation	13 Lender's Job Title					
14	Lender's Employe	r/Law Firm	15 Law Firm of lender's spous	se (if any)				
16	If lender is child, la	w firm of parent(s) (if any)	I					
17	Description of Coll X None	ateral	18 Check if personal funds were deposited into political account (See Instructions)					
19	GUARANTOR INFORMATION	20 Name of guarantor	22 Amount Guarantee					
	X not applicable	21 Guarantor address; City; State;	Zip Code					
23	Guarantor's Princi	pal Occupation	24 Guarantor's Job Title					
25	Guarantor's Emplo	oyer/Law Firm	26 Law Firm of guarantor's sp	ouse (if any)				
27	If guarantor is child	d, law firm of parent(s) (if any)						

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Servi				Vage:	s/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not liste	d above)
_	Tatal as as a Cabadala Etc.	1_	EU ED MANA		uction Guid	e expiairis	now to co	illpi	ete this form.	1_	E3 ID	/Ethion Comm	.::
1	Total pages Schedule F1:	2								3	Filer ID	(Ethics Comn	nission Filers)
	Sch: 1/11 Rpt: 29/40		Brame , Arç	gie D. (M	lrs.)						00089706		
4	Date	5	Payee name										
	05/08/2025		4Houston C	Center									
6	Amount (\$)	7	Payee addre	ss; C	ity;	State;	Zip Co	ode					
	\$25.00		1050 Austir	n St.									
			Houston, T	X 77010									
8	PURPOSE	(a)	Category (S	ee Categorie	s listed at the t	op of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Event Expe	ense							de of Texas. Com		
									_		officeholder living	j expense	
									Marketing Ex	hei	130		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	iceholder	name	C	Office sou	ıght			Office he	eld	
	Date		Payee name										
	05/02/2025		Amazon										
	Amount (\$)		Payee addre	ss; C	ity;	State;	Zip Co	ode					
	\$122.18		410 Terry A	Avenue N	lorth								
			Seattle, WA	98109									
	PURPOSE OF	(a)	Category (S	ee Categorie	s listed at the t	op of this sch	edule)	(b)	Description				
	EXPENDITURE		Advertising	Expense	е				—		de of Texas. Com officeholder living		
									Promotional i			j expense	
									Tromotionari	iteri	13		
	Complete ONLY if direct	Ц,	Candidate/Off	icoholdor	namo		Office sou	ıaht			Office he	ald.	
	expenditure to benefit C/OI		Sanuluale/On	iceriolaei	name		JIIICE SUL	igni			Office H	aiu .	
		_											
	Date		Payee name										
	05/13/2025		Avenida Br	azil									
	Amount (\$)		Payee addre	ess; C	ity;	State;	Zip Co	ode					
	\$4,529.47		12350 Sout	thwest F	wy								
			Stafford, T	K 77477									
	PURPOSE	(a)	Category (S	ee Categorie	es listed at the t	op of this sch	edule)	(b)	Description	_			
	OF EXPENDITURE		Food/Bever	rage Exp	ense				_		de of Texas. Com		
									_		officeholder living	j expense	
									Campaign Ki	CKC	ııı Everil		
								Ļ					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	iceholder	name	C	Office sou	ıght			Office he	eld	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

1 Total pages Schedule F1: Sch: 2/11 Rpt: 30/40 Brame , Argie D. (Mrs.) 4 Date	
Sch: 2/11 Rpt: 30/40 Brame , Argie D. (Mrs.) 00089706 4 Date	
Bearden, Susan 7 Payee address; City; State; Zip Code 122 Golfview Drive Richmond, TX 77469 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gift/donation - Fort Bend County GED Graduates 9 Complete ONLY if direct expenditure to benefit C/OH Date O2/24/2025 Payee name Bhamani, Afsheen	
Amount (\$) \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$40.00 \$4	
\$40.00 122 Golfview Drive Richmond, TX 77469 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gift/donation - Fort Bend County GED Graduates 9 Complete ONLY if direct expenditure to benefit C/OH Date O2/24/2025 Payee name Bhamani, Afsheen	
Richmond, TX 77469 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gift/donation - Fort Bend County GED Graduates 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name 02/24/2025 Payee name Bhamani, Afsheen	
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gift/donation - Fort Bend County GED Graduates 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name 02/24/2025 Payee name Bhamani, Afsheen	
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gift/donation - Fort Bend County GED Graduates 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name 02/24/2025 Payee name Bhamani, Afsheen	
OF EXPENDITURE Gift/Awards/Memorials Expense Gift/Awards/Memorials Expense Gift/Awards/Memorials Expense Gift/donation - Fort Bend County GED Graduates 9 Complete ONLY if direct expenditure to benefit C/OH Date 02/24/2025 Payee name Bhamani, Afsheen	
SiturAwards/Memorials Expense Gift/donation - Fort Bend County GED Graduates Gift/donation - Fort Bend County GED Graduates Gift/donation - Fort Bend County GED Graduates Office sought Date 02/24/2025 Payee name Bhamani, Afsheen	
9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name 02/24/2025 Payee name Bhamani, Afsheen	
9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name 02/24/2025 Phamani, Afsheen	
Date Payee name 02/24/2025 Bhamani, Afsheen	
Date Payee name 02/24/2025 Bhamani, Afsheen	
Date Payee name 02/24/2025 Bhamani, Afsheen	
02/24/2025 Bhamani, Afsheen	
· · · · · · · · · · · · · · · · · · ·	
Amount (\$) Payee address; City; State; Zip Code	
\$25.00 11920 S Texas 6	
Sugar Land, TX 77498	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Chack if travel outside of Taxas Complete Schedule T	
EXPENDITURE Contributions/Donations Made By	
Candidate/Officeholder/Political Committee Community Iftar Contribution	
Community mar Contribution	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
Date I -	_
Date Payee name	
06/09/2025 Dibrell & Associates	
Amount (\$) Payee address; City; State; Zip Code	
\$325.00 4203 Glade Shadow Ct	
Katy, TX 77494	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF Printing Expense Check if travel outside of Texas. Complete Schedule T.	
Check if Austin, 11X, officenoider living expense	
Promotional bags	
Complete ONLY if direct Condidate/Officeholder name	
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
•	

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide	ense Print Sala	Ü	se s/Contract Labor		Travel in District Travel Out of Di OTHER (enter a	
1	Total pages Schedule F1:						1	Filer ID	(Ethics Commission Filers)
	Sch: 3/11 Rpt: 31/40	Brame , Arg	gie D. (Mrs.)					00089706	
4	Date	5 Payee name							
	06/03/2025	Dibrell & As							
6	Amount (\$)	7 Payee addre	•	State; Zip	Code				
	\$1,000.00	4203 Glade	Shadow Ct						
		Katy, TX 77	494						
8	PURPOSE OF		ee Categories listed at the to	p of this schedule)	(b)	Description			
	EXPENDITURE	Consulting	Expense					e of Texas. Com officeholder living	nplete Schedule T. g expense
						Monthly Cons			
9	Complete ONLY if direct expenditure to benefit C/O		ceholder name	Office	sought			Office h	eld
	Date	Payee name							
	05/20/2025	Dibrell & As	sociates						
	Amount (\$)	Payee addre	ss; City;	State; Zip	Code				
	\$96.00	4203 Glade	Shadow Ct						
		Katy, TX 77	494						
	PURPOSE	(a) Category (Se	ee Categories listed at the to	p of this schedule)	(b)	Description			
	OF EXPENDITURE	Advertising				<u></u>		e of Texas. Com officeholder living	nplete Schedule T.
						Car magnets			
						agoto		, 0.8110	-
	Complete ONLY if direct expenditure to benefit C/Oh		ceholder name	Office	sought			Office h	eld
F	Date	Payee name							
	02/14/2025	Dibrell & As	sociates						
	Amount (\$)	Payee addre	ss; City;	State; Zip	Code				
	\$100.00	4203 Glade	Shadow Ct						
		Katy, TX 77	494						
	PURPOSE OF		ee Categories listed at the to	p of this schedule)	(b)	Description			
	EXPENDITURE	Advertising	Expense			ш		e of Texas. Com officeholder living	nplete Schedule T. g expense
						Facebook Ad			
								-	
	Complete ONLY if direct expenditure to benefit C/O		ceholder name	Office	sought			Office h	eld

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 co	omple	ete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 4/11 Rpt: 32/40		Brame , Argie D. (Mrs.)		00089706
4	Date	5	Payee name		·
	01/12/2025		Dibrell & Associates		
6	Amount (\$)	7	Payee address; City; State; Zip Co	ode	
	\$2,000.00		4203 Glade Shadow Ct		
			Katy, TX 77494		
8	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 Campaign Crate
					Campaign Crate
9	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office sou	<u>I</u> ught	Office held
	expenditure to benefit C/O			3	
_	Date	Т	Payee name		
	01/23/2025		Dibrell & Associates		
	Amount (\$)	╁	Payee address; City; State; Zip Co	ode	
	\$300.00		4203 Glade Shadow Ct		
			Katy, TX 77494		
_	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF	(")	Printing Expense	(~)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		g <u>_</u> pooc		Check if Austin, TX, officeholder living expense
					Promotional items
	2	L,		<u> </u>	25
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office sou	ught	Office held
		_			
	Date		Payee name		
	06/30/2025	╄	Donor Box		
	Amount (\$)		Payee address; City; State; Zip Co	ode	
	\$1,677.13		1520 Belle View Blvd.		
			#4106		
		L	Alexandria, VA 22307	_	
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE		Fees		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
					Processing / Platform fees
					·
	Complete ONLY if direct		Candidate/Officeholder name Office sou	ught	Office held
	expenditure to benefit C/OI	Н			

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 5/11 Rpt: 33/40	Brame , Argie D. (Mrs.) 00089706
4	Date	5 Payee name
	05/13/2025	EasyVisualz Media
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$400.00	70 E. Briar Hollow Ln
		Houston, TX 77027
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Photographer - Campaign Kickoff
		Filotographer - Campaigh Rickon
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_	Data	
	Date	Payee name
	05/21/2025	FBC Deputy Sheriff's Association
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	PO Box 931
		Richmond, TX 77406
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		Sponsorom, 7 Gooden
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Payee name
	02/12/2025	FBC Tejano Democrats
		,
	Amount (\$) \$35.00	Payee address; City; State; Zip Code
	φ35.00	
		D'Accest TV
		Richmond, TX
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Contribution/Membership
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·

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 Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/11 Rpt: 34/40	Brame , Argie D. (Mrs.) 00089706
4	Date	5 Payee name
	06/18/2025	Family Dollar
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$27.01	9890 Fondren Rd.
		Houston, TX 77096
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Juneteenth Parade Candy Giveaway
_		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/05/2025	Fort Bend County Clerk
	Amount (\$)	Payee address; City; State; Zip Code
	\$14.00	301 Jackson
		Richmond, TX 77469
	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.
	ZA ZADITORZ	Check if Austin, TX, officeholder living expense
		Filing fee - DBA
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	<u> </u>	_
	Date	Payee name
	02/12/2025	Fort Bend Young Democrats
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	
		Sugar Land, TX
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		Containdation
	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

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 7/11 Rpt: 35/40	Brame , Argie D. (Mrs.)	00089706
4	Date	5 Payee name	
	03/15/2025	Furry Friends Animal Aid Corporation	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$50.00	17423 Astrachan Rd	
		Richmond, TX 77407	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Wade By	outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee Check if Austin, Donation	, TX, officeholder living expense
		Donation	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
۱	expenditure to benefit C/O		Office field
_	Date	Payee name	
	04/04/2025	Gringo's	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$56.59	19940 Southwest Fwy	
		Sugar Land, TX 77479	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	1 00d/Develage Expense	outside of Texas. Complete Schedule T.
		Marketing lun	, TX, officeholder living expense
		Walkering fall	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
-	Date	Payee name	
	05/13/2025	Hernandez, Regina	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$120.00	7204 Town Center Blvd	
	Ψ120.00	1204 Town Contest Biva	
		Rosenberg, TX 77471	
	DUDDOCE		
	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule) (b) Description	outside of Texas. Complete Schedule T.
	EXPENDITURE	Toda/Beverage Expense	TX, officeholder living expense
		,	Cookies / Kickoff giveaway
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OH	1	
	rms provided by Tayas F	thice Commission was athics state to us	Version V/4.1.0 f10d0fd8

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Total manage Calc. 1.1. Etc.	1
1	Total pages Schedule F1:	
	Sch: 8/11 Rpt: 36/40	Brame , Argie D. (Mrs.) 00089706
4	Date	5 Payee name
	02/08/2025	Lone Star Exchange Club
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$50.00	43 Laurel Wreath Trail
		Sugar Land, TX 77498
Ļ	DUDDOOF	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Contributions/Memberships
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash	Data	
	Date	Payee name
	05/14/2025	M3 Graphics
	Amount (\$)	Payee address; City; State; Zip Code
	\$697.13	11730 S Wilcrest Dr
		Houston, TX 77099
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Printing Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Yard signs, business cards, and shirts
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/11/2025	NAACP Missouri City and Vicinity Branch
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.00	P.O. BOX 1053
	Φ30.00	1 .O. DOX 1000
		Missouri City, TX 77459
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	- -	Candidate/Officeholder/Political Committee
		Contribution/Membership
	Operation Children	Overflideta (Official to Identify and Identification and Identify and
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/11 Rpt: 37/40	Brame , Argie D. (Mrs.) 00089706
4	Date	5 Payee name
	01/21/2025	See You At the Polls
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$275.00	3311 Raleigh Row
		Missouri City, TX 77459
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
•	OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Donation to Nursing Homes
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/15/2025	Spectator's
	Amount (\$)	Payee address; City; State; Zip Code
	\$11.65	1525 Lake Pointe Pkwy
		Suite 100
		Sugar Land, TX 77478
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Reverage 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
		Food Expense at fundraising events
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/03/2025	UPS
	Amount (\$)	Payee address; City; State; Zip Code
	\$277.00	16107 Kensington Dr.
		Sugar Land, TX 77479
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		P.O. Box
	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
Credit Card Payment

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to co	mple	lete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 10/11 Rpt: 38/40	Brame , Argie D. (Mrs.)		00089706
4	Date	5 Payee name		1
	05/08/2025	USPS		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$58.40	4110 Bluebonnet Dr.		
		Stafford, TX 77477		
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.
	LAPENDITORE			Check if Austin, TX, officeholder living expense
				Stamps
_	Opening ONE V if dispert	Out lides (Office helders are		Office health
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sou	ignt	t Office held
_				
	Date	Payee name		
	05/23/2025	Wang, Antony		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$455.00	6588 Corporate Dr		
		Suite 368		
		Houston, TX 77036		
	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 Print & Digital designs
				Time a Digital designs
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/O		9	
	Date	Payee name		
	05/02/2025	Wang, Antony		
	Amount (\$)	Payee address; City; State; Zip Co	nda	
	\$170.00	6588 Corporate Dr.	ue	
	Ψ170.00	STE 368		
		Houston, TX 77036		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Printing Expense		Check if Austin, TX, officeholder living expense
				Step and Repeat
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/O	1		
_				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
	Sch: 11/11 Rpt: 39/40	Brame , Argie D. (Mrs.)	00089706	
4	Date	5 Payee name		
	02/21/2025	Wang, Antony		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$120.00	6588 Corporate Dr.		
		Suite 368		
		Houston, TX 77036		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Office Overhead/Rental Expense	outside of Texas. Complete Schedule T.	
	EXI ENDITORE	,	, TX, officeholder living expense	
		Campaign er	naii / 1 year	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held	
9	expenditure to benefit C/O		Office field	
_	Data	Davies rema		
	Date 05/19/2025	Payee name Zazzle		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$181.69	800 Seaport Blvd		
		Redwood City, CA 94063		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Tilling Expense	outside of Texas. Complete Schedule T. , TX, officeholder living expense	
		Thank you ca		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held	
expenditure to benefit C/OH				
1				

OUTSTAI	SCHEDULE L		
The Instruction	on Guide explains how to complete this form.	1 Total pages Schedule L: Sch: 1/1 Rpt: 40/40	
2 FILER NAME Brame , Argie [. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00089706	
LENDER INFORMATION	4 Name of lender Brame, Byron	I	
	5 Lender address; City; State; Zip Code		
	REDACTED PER 254.0313, GOV'T CODE		
GUARANTOR INFORMATION	6 Name of guarantor		
X not applicable	7 Guarantor address; City; State; Zip Code		