

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00027106		2 Total pages filed: 103		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable		FIRST Donna	MI		
	NICKNAME		LAST Roth	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input checked="" type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE		
		REDACTED PER 254.0313, GOV'T CODE				
		Date Hand-delivered or Date Postmarked				
		Receipt #		Amount		
		Date Processed				
		Date Imaged				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.		FIRST Andrea S.	MI		
	NICKNAME		LAST Roth	SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE; ZIP CODE	
	REDACTED PER 254.0313, GOV'T CODE					
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION			
	(713)	654-2143				
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)					
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)					
9 PERIOD COVERED	Month	Day	Year	THROUGH	Month Day Year	
	01/01/2025				06/30/2025	
10 ELECTION	ELECTION DATE		ELECTION TYPE			
	Month	Day	Year	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special		
	03/03/2026					
11 OFFICE	OFFICE HELD (if any) District Judge District 295			12 OFFICE SOUGHT (if known)		

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

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13 C / OH NAME Roth, Donna (The Honorable)	14 Filer ID (Ethics Commission Filers) 00027106
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 240,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 45,171.19
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 179,291.01
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

The Honorable Donna Roth

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

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

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18 FILER NAME Roth, Donna (The Honorable)		19 Filer ID (Ethics Commission Filers) 00027106
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 240,000.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 45,171.19
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/62 Rpt: 4/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adjei, Alvin <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98101	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm HKM Employment Attorneys LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adler, Jim <hr/> Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$5,000.00
Contributor's Principal Occupation Trial Attorney		Contributor's Job Title Trial Attorney
Contributor's employer/law firm Jim Adler and Associates		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adroque, Matias <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Trial Lawyer		Contributor's Job Title Trial Lawyer
Contributor's employer/law firm Matias J. Adroque PLLC		Law firm of contributor's spouse (if any)
If contributor is 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: 2/62 Rpt: 5/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akerman LLP <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77056	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amaro, James <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$5,000.00
Contributor's Principal Occupation Owner/Attorney		Contributor's Job Title Owner/Attorney
Contributor's employer/law firm Amaro Law Firm		Law firm of contributor's spouse (if any) Amaro Law Firm
If contributor is a child, law firm of parent(s) (if any)		
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anthony G. Buzbee LP <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$5,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is 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: 3/62 Rpt: 6/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong Lee & Baker LLP <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77092	7 Amount of Contribution (\$) \$5,000.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, George <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Thompson, Coe, Cousins & Irons, LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Kurt <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$5,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Arnold & Itkin		Law firm of contributor's spouse (if any)
If contributor is 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: 4/62 Rpt: 7/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aziz, Erin <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002	7 Amount of Contribution (\$) \$5,000.00
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any) Abraham Watkins Nichols Agosto Aziz & Stogner
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aziz, Mohammad <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$5,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Abraham Watkins		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrow, Hunter <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Shareholder		Contributor's Job Title Shareholder
Contributor's employer/law firm Andrews Myers PC		Law firm of contributor's spouse (if any)
If contributor is 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: 5/62 Rpt: 8/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bartholet, Dominique <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77304	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Attorney/Mediator		9 Contributor's Job Title Attorney/Mediator
10 Contributor's employer/law firm Bartholet Mediation		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck Redden LLP <hr/> Contributor address; City; State; Zip Code Houston, TX 77010	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benny Agosto JR PC <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is 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: 6/62 Rpt: 9/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birdsell, Andrew <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77008	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation Mediation		9 Contributor's Job Title Mediation
10 Contributor's employer/law firm Birdsell Law PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bissinger, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Bissinger, Oshman, Williams & Strasburger LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bracewell PAC <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is 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: 7/62 Rpt: 10/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley Arant Boulton Cummings Texas PAC <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75270	7 Amount of Contribution (\$) <div style="text-align: right;">\$1,000.00</div>
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bragg, Melanie <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) <div style="text-align: right;">\$100.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Bragg Law PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brann, Scott <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) <div style="text-align: right;">\$500.00</div>
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm Brann Sullivan Trial Lawyers PLLC		Law firm of contributor's spouse (if any)
If contributor is 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: 8/62 Rpt: 11/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broocks, Linda <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77006	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Kean Miller LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broocks, Linda <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Kean Miller, LP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Terry <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$600.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is 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: 9/62 Rpt: 12/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caldwell Fletcher <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77019	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camp, Kevin <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Roven Camp, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chamberlain Hrdlicka White Williams & Aughttry PC <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is 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: 10/62 Rpt: 13/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Sherry <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77401	7 Amount of Contribution (\$) <div style="text-align: right;">\$500.00</div>
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm The Chandler Law Firm		11 Law firm of contributor's spouse (if any) The Chandler Law Firm
12 If contributor is a child, law firm of parent(s) (if any)		

Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Troy <hr/> Contributor address; City; State; Zip Code Houston, TX 77401	Amount of Contribution (\$) <div style="text-align: right;">\$2,500.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Chandler McNulty, LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chang, LaVerne <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) <div style="text-align: right;">\$250.00</div>
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm Cardwell & Chang PLLC		Law firm of contributor's spouse (if any)
If contributor is 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: 11/62 Rpt: 14/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cienfuegos, Daniel 6 Contributor address; City; State; Zip Code Houston, TX 77018	7 Amount of Contribution (\$) \$50.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Crim & Villalpando, PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Love & Hutson PLLC Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$5,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cokinios Young Contributor address; City; State; Zip Code Houston, TX 77010	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is 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: 12/62 Rpt: 15/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cortes, Eddie <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77076	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craft, Hunter <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Craft Law Firm, P.C.		Law firm of contributor's spouse (if any) Craft Law Firm, P.C.
If contributor is a child, law firm of parent(s) (if any)		
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craft, Loren <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Craft Chu PLLC		Law firm of contributor's spouse (if any) HCD AO
If contributor is 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: 13/62 Rpt: 16/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Das, Micky <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77024	7 Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$1,000.00</div>
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Tyler & Das		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davenport, Scott <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$1,000.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm DLF Card		Law firm of contributor's spouse (if any) Davenport Law Firm
If contributor is a child, law firm of parent(s) (if any)		
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Di Ferrante, Chris <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$250.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Chris Di Ferrante Attorney at Law		Law firm of contributor's spouse (if any)
If contributor is 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: 14/62 Rpt: 17/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobrowski, Paul <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77007	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation Lawyer		9 Contributor's Job Title Lawyer
10 Contributor's employer/law firm Dobrowski Stafford & Pierce LLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dow, Sanford <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Dow Golub Remels & Gilbreath PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drinnon, Rodney <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm McCathern Houston		Law firm of contributor's spouse (if any)
If contributor is 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: 15/62 Rpt: 18/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duckers, Sarah <hr/> 6 Contributor address; City; State; Zip Code Bellaire, TX 77401	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Sechrist Duckers LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dykema Gossett PLLC <hr/> Contributor address; City; State; Zip Code Detroit, MI 48243	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edgardo Colon PC <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is 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: 16/62 Rpt: 19/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, George <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77007	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation Partner		9 Contributor's Job Title Partner
10 Contributor's employer/law firm Edwards Sutarwalla Samani LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Spencer <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Hudgins Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellzey Kherkher Sanford & Montgomery LLP <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is 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: 17/62 Rpt: 20/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrar, Kyle <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77008	7 Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$2,500.00</div>
8 Contributor's Principal Occupation Lawyer		9 Contributor's Job Title Lawyer
10 Contributor's employer/law firm Kaster, Lynch, Farrar & Ball		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feldman, Cris <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$500.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Feldman & Feldman PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fjeld, Jerome <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77096	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$5,000.00</div>
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm Jerome O. Fjeld, PLLC		Law firm of contributor's spouse (if any)
If contributor is 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: 18/62 Rpt: 21/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fogler O'Neil & Gray LLP <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77010	7 Amount of Contribution (\$) <div style="text-align: right;">\$1,000.00</div>
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foley & Lardner LLP Texas Campaign Fund <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201	Amount of Contribution (\$) <div style="text-align: right;">\$200.00</div>
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster Yarborough PLLC <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) <div style="text-align: right;">\$1,000.00</div>
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

SCHEDULE A(J)1

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 20/62 Rpt: 23/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs, Robin <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002	7 Amount of Contribution (\$) <div style="text-align: right;">\$500.00</div>
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Gibbs & Bruns LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs, Robin <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) <div style="text-align: right;">\$500.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Gibbs & Bruns LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 06/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, Jason <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77098	Amount of Contribution (\$) <div style="text-align: right;">\$1,000.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Gibson Law Firm		Law firm of contributor's spouse (if any) The Gibson Law Firm
If contributor is 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: 21/62 Rpt: 24/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goolsby, Edward <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77010	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Ahmad, Zavitsanos & Mensing PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hadi, Husein <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77479-3822	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Hadi Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Benjamin <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Hall Law Firm		Law firm of contributor's spouse (if any)
If contributor is 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: 22/62 Rpt: 25/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardin, Rusty 6 Contributor address; City; State; Zip Code Houston, TX 77005	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Rusty Hardin & Associates		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Ronnie Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Harrison Law Office, PC		Law firm of contributor's spouse (if any) Harrison Law Office PC
If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Jim Contributor address; City; State; Zip Code Houston, TX 77017	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Partner		Contributor's Job Title Partner
Contributor's employer/law firm Williams Hart		Law firm of contributor's spouse (if any)
If contributor is 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: 23/62 Rpt: 26/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hataway-Cone', Misty <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77007	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Cone' PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Havins, John <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Havins & Associates, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynes and Boone PAC <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is 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: 24/62 Rpt: 27/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendrickson, Bradford <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Hendrickson Law PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henke, Charlie <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Managing Partner		Contributor's Job Title Managing Partner
Contributor's employer/law firm Henke & Williams, LLP		Law firm of contributor's spouse (if any) Thompson Coe
If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herd, Charles <hr/> Contributor address; City; State; Zip Code Houston, TX 77070	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm Herd Law Firm, PLLC		Law firm of contributor's spouse (if any)
If contributor is 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: 25/62 Rpt: 28/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrera, Lauren <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77008	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Herrera Law		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Brett <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Gibson Hill, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoff, Robert <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$150.00
Contributor's Principal Occupation Oilfield		Contributor's Job Title Oilfield
Contributor's employer/law firm PTS		Law firm of contributor's spouse (if any)
If contributor is 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: 26/62 Rpt: 29/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollingsworth, Lara <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77027	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Durham, Pittard, & Spalding, LLP		11 Law firm of contributor's spouse (if any) Drumheller, Hollingsworth, & Monthly
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horowitz, Daniel <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Law Office of Daniel D. Horowitz, III PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston, Samuel <hr/> Contributor address; City; State; Zip Code Houston, TX 77041	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is 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: 27/62 Rpt: 30/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Carlos <hr/> 6 Contributor address; City; State; Zip Code Pearland, TX 77581	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm The Hughes Law Firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunton Andrews Kurth Texas PAC <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Husain, Nomaan <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Husain Law		Law firm of contributor's spouse (if any)
If contributor is 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: 28/62 Rpt: 31/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irelan, Bradford <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77004	7 Amount of Contribution (\$) <div style="text-align: right;">\$500.00</div>
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Irelan McDaniel, PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Itkin, Jason <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) <div style="text-align: right;">\$5,000.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Arnold & Itkin		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson Walker LLP PAC <hr/> Contributor address; City; State; Zip Code Houston, TX 77010	Amount of Contribution (\$) <div style="text-align: right;">\$1,500.00</div>
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is 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: 29/62 Rpt: 32/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Drews, and Boanerges Law Firm PC 6 Contributor address; City; State; Zip Code Houston, TX 77055	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kherkher, Steve Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$5,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Kherkher Garcia LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kidd, Donald Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Perdue & Kidd LLP		Law firm of contributor's spouse (if any) Tammy Butler Kidd, PC
If contributor is 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: 30/62 Rpt: 33/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim, John (Mr.) 6 Contributor address; City; State; Zip Code Houston, TX 77006	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm The Kim Law Firm		11 Law firm of contributor's spouse (if any) The Kim Law Firm
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirkpatrick, Eric Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Kirkpatrick Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kishinevsky, Leo Contributor address; City; State; Zip Code Houston, TX 77040	Amount of Contribution (\$) \$150.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Kishinevsky Law Firm		Law firm of contributor's spouse (if any) Kishinevsky Law Firm
If contributor is 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: 31/62 Rpt: 34/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klitsas, Loren <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77379	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Lawyer		9 Contributor's Job Title Lawyer
10 Contributor's employer/law firm Klitsas & Vercher Law Firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krumpholz, Jeff <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Krumpholz Law Firm PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kwok, Robert <hr/> Contributor address; City; State; Zip Code Houston, TX 77042	Amount of Contribution (\$) \$5,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Kwok Daniels		Law firm of contributor's spouse (if any)
If contributor is 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: 32/62 Rpt: 35/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lannie, Scott <hr/> 6 Contributor address; City; State; Zip Code Baytown, TX 77521	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Law Offices Scott C Lannie		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanza, Nick <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of Contribution (\$) \$2,000.00
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm Lanza Law Firm		Law firm of contributor's spouse (if any) Lanza Law Firm
If contributor is a child, law firm of parent(s) (if any)		
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lapidus, Mark <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Lapidus Knudsen PC		Law firm of contributor's spouse (if any)
If contributor is 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: 33/62 Rpt: 36/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laurenzo, Lena <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77023	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Partner		9 Contributor's Job Title Partner
10 Contributor's employer/law firm Abraham Watkins		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of Domingo Garcia LLP <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of Janet P. Hanson <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is 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: 34/62 Rpt: 37/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Layrisson, Louie <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002	7 Amount of Contribution (\$) <div style="text-align: right;">\$500.00</div>
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Baker Botts LLP		11 Law firm of contributor's spouse (if any) Serpe Andrews PLLC
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leisten, Denise <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of Contribution (\$) <div style="text-align: right;">\$500.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Nistico, Crouch & Kessler, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Livingston, Phillip <hr/> Contributor address; City; State; Zip Code Houston, TX 77237	Amount of Contribution (\$) <div style="text-align: right;">\$100.00</div>
Contributor's Principal Occupation Attorney/Mediator		Contributor's Job Title Attorney/Mediator
Contributor's employer/law firm Phillip R Livingston, PC		Law firm of contributor's spouse (if any)
If contributor is 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: 35/62 Rpt: 38/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77094	7 Amount of Contribution (\$) \$2,500.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm J Lopez Law Firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Jose <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Jose R. Lopez II		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowenberg, Mike <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$5,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Lowenberg Law Firm, PLLC		Law firm of contributor's spouse (if any)
If contributor is 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: 36/62 Rpt: 39/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahendru, Ashish <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77008	7 Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$5,000.00</div>
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Mahendru, PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manji, Abel <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$500.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Hird, Chu, Lawji & Manji		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manor, Jeralynn <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$1,000.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Manor Law Firm		Law firm of contributor's spouse (if any)
If contributor is 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: 37/62 Rpt: 40/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marc Whitehead & Associates LLP 6 Contributor address; City; State; Zip Code Houston, TX 77007	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcos, Jr., Javier Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$5,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Offices of Javier Marcos & Associates, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martines, Buffy Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Laminack Pirtle & Martines		Law firm of contributor's spouse (if any)
If contributor is 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: 38/62 Rpt: 41/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Patrice <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77007	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Lanier Law Firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medack, David <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77478	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Heard & Medack, P.C.		Law firm of contributor's spouse (if any) Heard & Medack, P.C.
If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medina, David M. <hr/> Contributor address; City; State; Zip Code Houston, TX 77030	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Nelson Mullins		Law firm of contributor's spouse (if any)
If contributor is 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: 39/62 Rpt: 42/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendoza, Mathew <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77019	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Mathew Mendoza		11 Law firm of contributor's spouse (if any) Cone PLLC
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mestemaker, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minces PC <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is 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: 40/62 Rpt: 43/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mithoff, Richard <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002	7 Amount of Contribution (\$) <div style="text-align: right;">\$1,000.00</div>
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Mithoff Law		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montazari, Soroush <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) <div style="text-align: right;">\$1,000.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Abraham, Watkins, Nichols, Agosto, Aziz & Stogner		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Daryl <hr/> Contributor address; City; State; Zip Code Houston, TX 77010	Amount of Contribution (\$) <div style="text-align: right;">\$1,000.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm AZA Law		Law firm of contributor's spouse (if any)
If contributor is 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: 41/62 Rpt: 44/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moye, Will <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77055	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Moye Law Firm		11 Law firm of contributor's spouse (if any) Moye Law Firm
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muessig, Craig <hr/> Contributor address; City; State; Zip Code Baytown, TX 77521	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Personal injury lawyer		Contributor's Job Title Personal injury lawyer
Contributor's employer/law firm Craig Muessig Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mukerji, Shampa <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Mukerji Law Firm		Law firm of contributor's spouse (if any) Mukerji Law Firm
If contributor is 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: 42/62 Rpt: 45/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munsch, Hardt, Kopf & Harr PC <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75201	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nielsen, Eric <hr/> Contributor address; City; State; Zip Code Houston, TX 77070	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Trial lawyer		Contributor's Job Title Trial lawyer
Contributor's employer/law firm The Nielsen Law Firm, P.C.		Law firm of contributor's spouse (if any) The Nielsen Law Firm, P.C.
If contributor is a child, law firm of parent(s) (if any)		
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nielsen, Stephanie <hr/> Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Self		Contributor's Job Title self
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is 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: 43/62 Rpt: 46/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noe Wilson, Susan <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77055	7 Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$5,000.00</div>
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm SBSB		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nolen, Rand <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$100.00</div>
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm Fleming, Nolen & Jez, L.L.P.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson & Olson LLP <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$250.00</div>
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is 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: 44/62 Rpt: 47/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ormiston, James 6 Contributor address; City; State; Zip Code Houston, TX 77056	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Lawyer		9 Contributor's Job Title Lawyer
10 Contributor's employer/law firm Gray Reed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pappapas, Chris Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Kane Russell Coleman & Logan		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Seth Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Law Firm of Alton C. Todd		Law firm of contributor's spouse (if any)
If contributor is 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: 45/62 Rpt: 48/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parthasarathi, Rashmi <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77040	7 Amount of Contribution (\$) \$150.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm The Kishinevsky Law Firm - Houston		11 Law firm of contributor's spouse (if any) The Kishinevsky Law Firm - Houston
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patrick Flynn PLC <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearce, Andrew <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Shareholder		Contributor's Job Title Shareholder
Contributor's employer/law firm BoyarMiller		Law firm of contributor's spouse (if any)
If contributor is 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: 46/62 Rpt: 49/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdue, Joe 6 Contributor address; City; State; Zip Code Houston, TX 77098	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm The Perdue Law Firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Brent Contributor address; City; State; Zip Code Houston, TX 77010	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Burford Perry LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plumbers Local Union No. 68 PAC Fund Contributor address; City; State; Zip Code Houston, TX 77249	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is 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: 47/62 Rpt: 50/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poelker, Kyle <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77030	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm AZA		11 Law firm of contributor's spouse (if any) 1st Court of Appeals of Texas
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter Hedges LLP <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Christopher <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Quinn Emanuel Urquhart & Sullivan OC		Law firm of contributor's spouse (if any)
If contributor is 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: 48/62 Rpt: 51/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pusch, Anthony <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77023	7 Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$5,000.00</div>
8 Contributor's Principal Occupation Lawyer		9 Contributor's Job Title Lawyer
10 Contributor's employer/law firm Pusch & Nguyen		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raizner, Jeff <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$2,500.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Raizner Slania		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Michael <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$1,000.00</div>
Contributor's Principal Occupation Owner		Contributor's Job Title Owner
Contributor's employer/law firm Ramsey Law Firm		Law firm of contributor's spouse (if any)
If contributor is 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: 49/62 Rpt: 52/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rapp Krock <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77056	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyna, Sharon <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Business Development Specialist		Contributor's Job Title Business Development Specialist
Contributor's employer/law firm SBSB Eastham		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds Frizzell LLP <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is 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: 50/62 Rpt: 53/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Chris <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002	7 Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$2,500.00</div>
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Reynolds Frizzell LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley Law Firm <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$250.00</div>
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sears, Ross <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$250.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Ross A. Sears II, PC		Law firm of contributor's spouse (if any)
If contributor is 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: 51/62 Rpt: 54/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shackelford, Bowen, McKinley & Norton LLP <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75231	7 Amount of Contribution (\$) <div style="text-align: right;">\$1,000.00</div>
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheppard, Daniel <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) <div style="text-align: right;">\$1,000.00</div>
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm Morrow & Sheppard LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shipley Snell Montgomery LLP <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) <div style="text-align: right;">\$500.00</div>
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is 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: 52/62 Rpt: 55/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Reed <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77010	7 Amount of Contribution (\$) <div style="text-align: right;">\$500.00</div>
8 Contributor's Principal Occupation Partner		9 Contributor's Job Title Partner
10 Contributor's employer/law firm Reed Smith LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sorrels, Randall <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) <div style="text-align: right;">\$2,500.00</div>
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm Sorrels Law		Law firm of contributor's spouse (if any) Sorrels Law
If contributor is a child, law firm of parent(s) (if any)		
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soussan, Susan <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) <div style="text-align: right;">\$100.00</div>
Contributor's Principal Occupation Mediator/Arbitrator		Contributor's Job Title Mediator/Arbitrator
Contributor's employer/law firm Susan S. Soussan, P.C.		Law firm of contributor's spouse (if any)
If contributor is 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: 53/62 Rpt: 56/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spagnoletti, Marcus <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002-1629	7 Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$5,000.00</div>
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Spagnoletti Law Firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurlock, Kim <hr/> Contributor address; City; State; Zip Code Humble, TX 77396	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$1,000.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Spurlock & Associates, P.C.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steptoe LLP <hr/> Contributor address; City; State; Zip Code Washington, DC 20036	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$500.00</div>
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is 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: 54/62 Rpt: 57/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevenson & Murray LLP 6 Contributor address; City; State; Zip Code Houston, TX 77046	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart J. Guss & Associates Contributor address; City; State; Zip Code Houston, TX 77070	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stogner, Brant Contributor address; City; State; Zip Code Houston, TX 77042	Amount of Contribution (\$) \$2,000.00
Contributor's Principal Occupation Trial Lawyer		Contributor's Job Title Trial Lawyer
Contributor's employer/law firm Abraham Watkins		Law firm of contributor's spouse (if any) Abraham Watkins
If contributor is 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: 55/62 Rpt: 58/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stogner, Brant <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77042	7 Amount of Contribution (\$) \$2,500.00
8 Contributor's Principal Occupation Trial Lawyer		9 Contributor's Job Title Trial Lawyer
10 Contributor's employer/law firm Abraham Watkins		11 Law firm of contributor's spouse (if any) Abraham Watkins
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Street, Hanson <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Settlement consultant		Contributor's Job Title Settlement consultant
Contributor's employer/law firm Street Settlements		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturm, Charles <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Sturm Law PLLC		Law firm of contributor's spouse (if any)
If contributor is 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: 56/62 Rpt: 59/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Roger <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77007	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Lawyer		9 Contributor's Job Title Lawyer
10 Contributor's employer/law firm Brann Sullivan Trial Lawyers, PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Roger <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm Brann Sullivan Trial Lawyers, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susman Godfrey LLP <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is 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: 57/62 Rpt: 60/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Poerschke Law Firm PC <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77079	7 Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$1,000.00</div>
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The West Law Firm <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$5,000.00</div>
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Bob <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$150.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is 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: 58/62 Rpt: 61/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thweatt, Lee <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77009	7 Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$1,000.00</div>
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Terry & Thweatt, PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tracey, Sean <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$2,500.00</div>
Contributor's Principal Occupation Partner/Attorney		Contributor's Job Title Partner/Attorney
Contributor's employer/law firm Tracey Fox & Walters		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez, Danielle <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$250.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm KPA Law PLLC		Law firm of contributor's spouse (if any)
If contributor is 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: 59/62 Rpt: 62/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vinson & Elkins Texas PAC <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002	7 Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$2,500.00</div>
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Volberding, James <hr/> Contributor address; City; State; Zip Code Tyler, TX 75703	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$250.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Volberding Legal Group PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wadler Law <hr/> Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$250.00</div>
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is 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: 60/62 Rpt: 63/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ware Jackson <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77019	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webster, Jason <hr/> Contributor address; City; State; Zip Code Houston, TX 77046	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webster, Jason <hr/> Contributor address; City; State; Zip Code Houston, TX 77036	Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Webster Vicknair Macleod		Law firm of contributor's spouse (if any)
If contributor is 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: 61/62 Rpt: 64/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weinberg & Weinberg LLP <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77009	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yetter Coleman LLP <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yetter, Paul <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Yetter Coleman LLP		Law firm of contributor's spouse (if any)
If contributor is 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: 62/62 Rpt: 65/103
2 FILER NAME Roth, Donna (The Honorable)		3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zavitsanos, John <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77010	7 Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$5,000.00</div>
8 Contributor's Principal Occupation Lawyer		9 Contributor's Job Title Lawyer
10 Contributor's employer/law firm AZA		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zehl, Ryan <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$2,500.00</div>
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm Zehl & Associates		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zimmerman, Brian <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$500.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Spencer Fane LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/37 Rpt: 66/103	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/05/2025	5 Payee name AB AV Rental	
6 Amount (\$) \$190.05	7 Payee address; City; State; Zip Code 3219 Five Oaks Dr. Missouri City, TX 77459	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense AV rental for fundraiser
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/27/2025	Payee name ABOTA	
Amount (\$) \$375.00	Payee address; City; State; Zip Code 2001 Bryan St #3000 Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense conference fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/27/2025	Payee name ABOTA	
Amount (\$) \$14.96	Payee address; City; State; Zip Code 2001 Bryan St #3000 Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense conference fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/37 Rpt: 67/103	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/22/2025	5 Payee name AJB Construction	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 26077 Nelson Way Katy, TX 77494	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense painting in jury room
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/11/2025	Payee name Acres of Angels	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 6719 W. Montgomery Rd Houston, TX 77091	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/26/2025	Payee name AirBNB	
Amount (\$) \$1,435.07	Payee address; City; State; Zip Code 888 Brannan St #119 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense New Mexico Lodging for conference
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/37 Rpt: 68/103	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/26/2025	5 Payee name Alamo Rental	
6 Amount (\$) \$339.59	7 Payee address; City; State; Zip Code 600 Corporate Park Dr. Saint Louis, MO 63105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car rental New Mexico conference
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/22/2025	Payee name Amazon	
Amount (\$) \$39.19	Payee address; City; State; Zip Code 410 Terry Avenue North Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense jury room decorations
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/22/2025	Payee name Amazon	
Amount (\$) \$28.95	Payee address; City; State; Zip Code 410 Terry Avenue North Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense jury room decorations
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/37 Rpt: 69/103	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/22/2025	5 Payee name Amazon	
6 Amount (\$) \$28.95	7 Payee address; City; State; Zip Code 410 Terry Avenue North Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense jury room decorations
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/02/2025	Payee name Arne's Houston	
Amount (\$) \$259.85	Payee address; City; State; Zip Code 2830 Hicks St Houston, TX 77007	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense decorations for intern lunch, and tablecloths for courtroom
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/27/2025	Payee name Avenida Parking	
Amount (\$) \$30.00	Payee address; City; State; Zip Code 710 Avenida De Las Americas Houston, TX 77003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense parking for event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/37 Rpt: 70/103	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/13/2025	5 Payee name Bayou City Strategies	
6 Amount (\$) \$2,000.00	7 Payee address; City; State; Zip Code PO Box 667204 Houston, TX 77266	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fundraising and compliance services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/13/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$2,000.00	Office held	
Date 06/13/2025	Payee name Bayou City Strategies	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code PO Box 667204 Houston, TX 77266	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fundraising and compliance services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/13/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$2,000.00	Office held	
Date 06/13/2025	Payee name Bayou City Strategies	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code PO Box 667204 Houston, TX 77266	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fundraising and compliance services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/13/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$2,000.00	Office held	
Date 06/13/2025	Payee name Bayou City Strategies	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code PO Box 667204 Houston, TX 77266	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fundraising and compliance services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/37 Rpt: 71/103	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/26/2025	5 Payee name Bradley Creative Studios	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 4900 Fournace Place Ste. 560 Bellaire, TX 77401	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense graphic design services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/20/2025	Payee name CAFE PASQUAL	
Amount (\$) \$168.05	Payee address; City; State; Zip Code 121 Don Gaspar Ave Santa Fe, NM 87501	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense dinner in Santa Fe
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/20/2025	Payee name CIBO Express	
Amount (\$) \$7.46	Payee address; City; State; Zip Code 2800 N Terminal Rd/ Houston, TX 77032	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense airport snacks
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/37 Rpt: 72/103	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/07/2025	5 Payee name Chick-Fil-A	
6 Amount (\$) \$93.10	7 Payee address; City; State; Zip Code 1200 McKinney Houston, TX 77010	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/17/2025	Payee name Competitive Edge	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 4900 Fournace Pl Bellaire Bellaire, TX 77401	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign consulting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2025	Payee name Constant Contact	
Amount (\$) \$51.16	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/37 Rpt: 73/103	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/23/2025	5 Payee name Constant Contact	
6 Amount (\$) \$47.97	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/23/2025	Payee name Constant Contact	
Amount (\$) \$47.97	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/24/2025	Payee name Constant Contact	
Amount (\$) \$47.97	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/37 Rpt: 74/103	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 02/24/2025	5 Payee name Constant Contact	
6 Amount (\$) \$47.97	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/23/2025	Payee name Constant Contact	
Amount (\$) \$47.97	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/16/2025	Payee name Corporate Liquidators	
Amount (\$) \$1,820.00	Payee address; City; State; Zip Code 501 N Shepherd Dr Houston, TX 77007	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense new jury room chairs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 04/27/2025	5 Payee name Costco	
6 Amount (\$) \$253.44	7 Payee address; City; State; Zip Code 3836 Richmond Ave Houston, TX 77027	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense jury snacks
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/18/2025	Payee name DURANS STATION	
Amount (\$) \$62.35	Payee address; City; State; Zip Code 4201 Menaul Blvd NE Albuquerque, NM 87110	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fuel for rental in NM
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/20/2025	Payee name Dions Pizza	
Amount (\$) \$110.02	Payee address; City; State; Zip Code 2014 Cerrillos Rd. Santa Fe, NM 87505	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meal in New Mexico during conference
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/16/2025	5 Payee name Dunkin Donuts	
6 Amount (\$) \$41.97	7 Payee address; City; State; Zip Code 2002 Yale St. Houston, TX 77008	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense jury breakfast
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/24/2025	Payee name El Pinto	
Amount (\$) \$94.00	Payee address; City; State; Zip Code 10500 4th St. NW Albuquerque, NM 87114	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense lunch in Santa Fe
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2025	Payee name Fast Park & Relax IAH	
Amount (\$) \$78.02	Payee address; City; State; Zip Code 6655 Will Clayton Pkwy Humble, TX 77338	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense airport parking
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 01/21/2025	5 Payee name Four Seasons Houston	
6 Amount (\$) \$96.60	7 Payee address; City; State; Zip Code 1300 Lamar St Houston, TX 77010	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TACTAS meeting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/16/2025	Payee name HEB #630	
Amount (\$) \$32.15	Payee address; City; State; Zip Code 1701 West Alabama St Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/06/2025	Payee name HEB #630	
Amount (\$) \$12.22	Payee address; City; State; Zip Code 1701 West Alabama St Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/22/2025	5 Payee name HEB #630	
6 Amount (\$) \$2.77	7 Payee address; City; State; Zip Code 1701 West Alabama St Houston, TX 77098	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/28/2025	Candidate/Officeholder name Office sought Office held	
Payee name HEB #630		
Amount (\$) \$11.16	Payee address; City; State; Zip Code 1701 West Alabama St Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/25/2025	Candidate/Officeholder name Office sought Office held	
Payee name HEB #630		
Amount (\$) \$48.50	Payee address; City; State; Zip Code 1701 West Alabama St Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 03/13/2025	5 Payee name HEB #630	
6 Amount (\$) \$16.81	7 Payee address; City; State; Zip Code 1701 West Alabama St Houston, TX 77098	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/10/2025	Payee name HEB #630	
Amount (\$) \$43.68	Payee address; City; State; Zip Code 1701 West Alabama St Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/14/2025	Payee name HEB #630	
Amount (\$) \$36.23	Payee address; City; State; Zip Code 1701 West Alabama St Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 02/03/2025	5 Payee name HEB #630	
6 Amount (\$) \$124.65	7 Payee address; City; State; Zip Code 1701 West Alabama St Houston, TX 77098	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2025	Payee name HEB #630	
Amount (\$) \$11.94	Payee address; City; State; Zip Code 1701 West Alabama St Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/17/2025	Payee name HEB #630	
Amount (\$) \$17.80	Payee address; City; State; Zip Code 1701 West Alabama St Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 01/03/2025	5 Payee name Harris County Democratic Party	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 3302 Canal St Ste 62 Houston, TX 77003	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CEC Holiday party sponsorship
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/11/2025	Payee name High, Rhonda	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 777 Post Oak Blvd Ste 450 Houston, TX 77056	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense holiday party labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/22/2025	Payee name Home Depot	
Amount (\$) \$86.56	Payee address; City; State; Zip Code 13400 Market St. Houston, TX 77015	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense paint for jury room
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/06/2025	5 Payee name Hot Bagel Shop	
6 Amount (\$) \$56.00	7 Payee address; City; State; Zip Code 2015 S. Shepherd Houston, TX 77019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/05/2025	Payee name Hotel Saint Augustine	
Amount (\$) \$9,259.45	Payee address; City; State; Zip Code 4110 Loretto Dr Houston, TX 77006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising expenses
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/06/2025	Payee name Hotel Saint Augustine	
Amount (\$) \$67.98	Payee address; City; State; Zip Code 4110 Loretto Dr Houston, TX 77006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense food and beverage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/05/2025	5 Payee name Hotel Saint Augustine	
6 Amount (\$) \$27.06	7 Payee address; City; State; Zip Code 4110 Loretto Dr Houston, TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Valet
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2025	Payee name Houston Lawyers Association	
Amount (\$) \$20.00	Payee address; City; State; Zip Code P.O. Box 300009 Houston, TX 77230	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense staff breakfast
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/26/2025	Payee name Houston Lawyers Association	
Amount (\$) \$500.00	Payee address; City; State; Zip Code P.O. Box 300009 Houston, TX 77230	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/23/2025	5 Payee name Houstonian	
6 Amount (\$) \$21.00	7 Payee address; City; State; Zip Code 111 N Post Oak Ln Houston, TX 77024	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TACTAS event parking
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/20/2025	Payee name IAH Whataburger	
Amount (\$) \$5.34	Payee address; City; State; Zip Code 3100 N Terminal Rd Houston, TX 77032	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense airport breakfast
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/12/2025	Payee name J&N Enterprises	
Amount (\$) \$319.34	Payee address; City; State; Zip Code 2519 Fairmond Park Dr Ste 302 Houston, TX 77092	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense jury stickers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 01/02/2025	5 Payee name Judge Michael Gomez	
6 Amount (\$) \$244.90	7 Payee address; City; State; Zip Code 201 Caroline Street 10th Floor Houston, TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense xmas gifts
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/02/2025	Payee name Kolache Factory Montrose	
Amount (\$) \$88.56	Payee address; City; State; Zip Code 2045 Westheimer Rd Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/13/2025	Payee name Kolache Factory Montrose	
Amount (\$) \$74.40	Payee address; City; State; Zip Code 2045 Westheimer Rd Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 21/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 01/17/2025	5 Payee name Kolache Factory Montrose	
6 Amount (\$) \$73.80	7 Payee address; City; State; Zip Code 2045 Westheimer Rd Houston, TX 77098	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2025	Payee name Kolache Factory Montrose	
Amount (\$) \$88.56	Payee address; City; State; Zip Code 2045 Westheimer Rd Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/09/2025	Payee name Kwik Kopy	
Amount (\$) \$63.87	Payee address; City; State; Zip Code 1405 Waugh Dr. Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing expenses
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 04/30/2025	5 Payee name Luby's	
6 Amount (\$) \$37.18	7 Payee address; City; State; Zip Code 1727 Old Spanish Trail Houston, TX 77054	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/24/2025	Payee name MR Moving	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 4610 Cairnlomond Houston, TX 77084	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense movers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2025	Payee name Marmo	
Amount (\$) \$362.95	Payee address; City; State; Zip Code 888 Westheimer Road Ste 109 Houston, TX 77006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense intern dinner
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 23/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/26/2025	5 Payee name McNiel, Kathryn	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 4711 Yoakum Blvd. Houston, TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign consulting services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2025	Payee name Monarch Printing	
Amount (\$) \$568.31	Payee address; City; State; Zip Code 6605 McGrew St B Houston, TX 77087	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense letterhead
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/22/2025	Payee name Osso & Kristalla	
Amount (\$) \$115.25	Payee address; City; State; Zip Code 1515 Texas Ave Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense lunch with intern
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 24/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 02/26/2025	5 Payee name Out for Education	
6 Amount (\$) \$62.10	7 Payee address; City; State; Zip Code PO Box 667010 Houston, TX 77266	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ticket to Mardi Gras event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/03/2025	Payee name Papasitos Cantina	
Amount (\$) \$122.59	Payee address; City; State; Zip Code 2536 Richmond Ave Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense staff lunch
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2025	Payee name ParkMobile	
Amount (\$) \$2.20	Payee address; City; State; Zip Code 1100 Spring Street NW Ste 200 Atlanta, GA 30309	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event parking
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 25/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 02/10/2025	5 Payee name ParkMobile	
6 Amount (\$) \$5.60	7 Payee address; City; State; Zip Code 1100 Spring Street NW Ste 200 Atlanta, GA 30309	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event parking
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/03/2025	Candidate/Officeholder name Office sought Office held	
Payee name ParkMobile		
Amount (\$) \$2.20	Payee address; City; State; Zip Code 1100 Spring Street NW Ste 200 Atlanta, GA 30309	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event parking
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/30/2025	Candidate/Officeholder name Office sought Office held	
Payee name Paypal		
Amount (\$) \$197.04	Payee address; City; State; Zip Code 2211 N 1st Street San Jose, CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 26/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/30/2025	5 Payee name Paypal	
6 Amount (\$) \$308.37	7 Payee address; City; State; Zip Code 2211 N 1st Street San Jose, CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/10/2025	Payee name Perry's Steakhouse	
Amount (\$) \$662.46	Payee address; City; State; Zip Code 1997 W. Gray St. Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign dinner
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2025	Payee name Raise The Money	
Amount (\$) \$3,227.09	Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 27/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/30/2025	5 Payee name Raise The Money	
6 Amount (\$) \$4,535.44	7 Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/11/2025	Payee name Relish	
Amount (\$) \$114.90	Payee address; City; State; Zip Code 2810 Westheimer Rd Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign dinner
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/02/2025	Payee name Relish	
Amount (\$) \$70.84	Payee address; City; State; Zip Code 2810 Westheimer Rd Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign dinner
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 28/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/30/2025	5 Payee name Sam's Club	
6 Amount (\$) \$79.50	7 Payee address; City; State; Zip Code 5310 S. Rice Ave. Houston, TX 77081	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense jury snacks
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2025	Payee name San Francisco Gallery	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 50 E San Francisco Street Santa Fe, NM 87501	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense chambers art
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/23/2025	Payee name San Francisco Gallery	
Amount (\$) \$1,800.00	Payee address; City; State; Zip Code 50 E San Francisco Street Santa Fe, NM 87501	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense chambers art
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 29/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/23/2025	5 Payee name TRES COLORES SANTA FE NM	
6 Amount (\$) \$115.79	7 Payee address; City; State; Zip Code 101 W Marcy St Santa Fe, NM 87501	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense dinner in Santa Fe
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/15/2025	Payee name Taco Cabana	
Amount (\$) \$64.92	Payee address; City; State; Zip Code 167 Yale St. Houston, TX 77007	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/30/2025	Payee name Taco Cabana	
Amount (\$) \$43.28	Payee address; City; State; Zip Code 167 Yale St. Houston, TX 77007	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 30/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 03/12/2025	5 Payee name Taco Cabana	
6 Amount (\$) \$43.28	7 Payee address; City; State; Zip Code 167 Yale St. Houston, TX 77007	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/06/2025	Payee name Taco Cabana	
Amount (\$) \$43.28	Payee address; City; State; Zip Code 167 Yale St. Houston, TX 77007	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/14/2025	Payee name Taco Cabana	
Amount (\$) \$43.28	Payee address; City; State; Zip Code 167 Yale St. Houston, TX 77007	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 31/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 01/16/2025	5 Payee name Taco Cabana	
6 Amount (\$) \$43.28	7 Payee address; City; State; Zip Code 167 Yale St. Houston, TX 77007	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Jury breakfast
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/16/2025	Payee name Target	
Amount (\$) \$119.08	Payee address; City; State; Zip Code 167 Yale St. Houston, TX 77007	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/09/2025	Payee name Tex-ABOTA	
Amount (\$) \$445.00	Payee address; City; State; Zip Code 2001 Bryan St #3000 Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CLE fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 32/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 05/21/2025	5 Payee name Texas Association of District Judges	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 505 Regency Dr. El Campo, TX 77437	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense lobbyist for lege work
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/27/2025	Payee name The Post Oak Hotel Valet	
Amount (\$) \$8.00	Payee address; City; State; Zip Code 1600 W. Loop S. Houston, TX 77027	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event parking
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/27/2025	Payee name The Post Oak Hotel Valet	
Amount (\$) \$8.00	Payee address; City; State; Zip Code 1600 W. Loop S. Houston, TX 77027	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event parking
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 33/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 01/10/2025	5 Payee name The Post Oak Hotel Valet	
6 Amount (\$) \$7.58	7 Payee address; City; State; Zip Code 1600 W. Loop S. Houston, TX 77027	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event parking
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2025	Payee name Treebeards	
Amount (\$) \$12.99	Payee address; City; State; Zip Code 1117 Texas Ave. Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense jury lunch
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2025	Payee name Treebeards	
Amount (\$) \$10.28	Payee address; City; State; Zip Code 1117 Texas Ave. Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense jury lunch
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 34/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/25/2025	5 Payee name Treebeards	
6 Amount (\$) \$10.28	7 Payee address; City; State; Zip Code 1117 Texas Ave. Houston, TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense jury lunch
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2025	Payee name Treebeards	
Amount (\$) \$9.74	Payee address; City; State; Zip Code 1117 Texas Ave. Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense jury lunch
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2025	Payee name Treebeards	
Amount (\$) \$9.20	Payee address; City; State; Zip Code 1117 Texas Ave. Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense jury lunch
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 35/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/25/2025	5 Payee name Treebeards	
6 Amount (\$) \$8.12	7 Payee address; City; State; Zip Code 1117 Texas Ave. Houston, TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense jury lunch
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/25/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$6.50	Payee name Treebeards	
	Payee address; City; State; Zip Code 1117 Texas Ave. Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense jury lunch
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/25/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$5.41	Payee name Treebeards	
	Payee address; City; State; Zip Code 1117 Texas Ave. Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense jury lunch
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/25/2025	Candidate/Officeholder name	Office sought
Amount (\$) \$5.41	Payee name Treebeards	
	Payee address; City; State; Zip Code 1117 Texas Ave. Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense jury lunch
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 36/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 06/25/2025	5 Payee name Treebeards	
6 Amount (\$) \$4.87	7 Payee address; City; State; Zip Code 1117 Texas Ave. Houston, TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense jury lunch
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2025	Payee name Treebeards	
Amount (\$) \$2.17	Payee address; City; State; Zip Code 1117 Texas Ave. Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense jury lunch
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Treebeards	
Amount (\$) \$214.34	Payee address; City; State; Zip Code 1117 Texas Ave. Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense staff lunch
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 37/37 Rpt:	2 FILER NAME Roth, Donna (The Honorable)	3 Filer ID (Ethics Commission Filers) 00027106
4 Date 01/08/2025	5 Payee name Treebeards	
6 Amount (\$) \$335.58	7 Payee address; City; State; Zip Code 1117 Texas Ave. Houston, TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense new judges lunch
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/28/2025	Payee name United Airlines	
Amount (\$) \$508.98	Payee address; City; State; Zip Code 609 Main Street Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Santa Fe Airfare
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/06/2025	Payee name Westin Downtown	
Amount (\$) \$61.58	Payee address; City; State; Zip Code 1520 Texas Ave. Houston, TX 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense new judges lunch
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.

1 Total pages Schedule T:
Sch: 1/1 Rpt: 103/103

2 FILER NAME
Roth, Donna (The Honorable)

3 Filer ID (Ethics Commission Filers)
00027106

4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee
United Airlines

5 Contribution / Expenditure reported on:

☐ Schedule A2 ☐ Schedule B ☐ Schedule B(J) ☐ Schedule C2 ☐ Schedule D ☒ Schedule F1
☐ Schedule F2 ☐ Schedule F4 ☐ Schedule G ☐ Schedule H ☐ Schedule COH-UC

6 Dates of Travel

06/17/2025

06/17/2025

7 Name of person(s) traveling

Roth, Donna (Judge)

8 Departure city or name of departure location

Houston

9 Destination city or name of destination location

Santa Fe

10 Means of transportation
Commercial Airplane

11 Purpose of travel (including name of conference, seminar, or other event)
ABOTA Conference