FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00086011 85 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Teresa J. NAME Date Received **ELECTRONICALLY FILED** 07/15/2025 NICKNAME LAST **SUFFIX** Waldrop CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Pamela E. NAME NICKNAME LAST **SUFFIX** Powell **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 597-8700 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Day Month Day Year Year **COVERED THROUGH** 01/01/2025 06/30/2025 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 312 Harris

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

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13 C / OH NAME	Waldrop, Teresa J. (The Honorable)	14 Filer ID (E 00086011	Ethics Commission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without d officeholders are required to report this information	the candidate's or officel	holder's knowledge or			
Additional Pages	COMMITTEE TYPE	TYPE COMMITTEE NAME					
ш	GENERAL						
		COMMITTEE ADDRESS					
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS				
16 CONTRIBUTION TOTALS		II IZED POLITICAL CONTRIBUTIONS(OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00			
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 88,235.01			
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 0.00			
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 12,052.18			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L ERIOD	AST DAY OF THE	\$ 79,432.34			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS ITING PERIOD	OF THE LAST DAY	\$ 41,600.00			
17 AFFIDAVIT							
		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.					
		The Honor	able Teresa J. Waldr	ор			
		Signature of	Candidate or Officehold	ler			
AFFIX NOT	ΓARY STAMP / SEAL AB	OVE					
Sworn to and subsc	cribed before me, by the s	aid	, this the	day			
		ertify which, witness my hand and seal of office.					
Signature of offic	er administering oath	Printed name of officer administering oath	Title of officer	administering oath			

SUBTOTALS - JC/OH

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

				3 of 85
18 FILER NAME Waldrop, Teresa	J. (The Honorable)	19 Filer ID 00086011	(Ethics Commiss	sion Filers)
20 SCHEDULE SUBTO			SUBTOTAL	_ AMOUNT
1. X SCHE	DULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	83,412.00
2. X SCHE	DULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	4,823.01
3. SCHEE	DULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4. X SCHE	DULE E(J): LOANS (JUDICIAL)		\$	2,000.00
5. X SCHE	DULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	9,452.91
6. SCHEE	DULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7. SCHEE	DULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8. X SCHE	DULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	7,236.27
9. X SCHEE	DULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	2,599.27
10. SCHEE	DULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
11. SCHE	DULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$	
12. SCHEI TO FIL	DULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F ER	RETURNED	\$	
			•	

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 1/29 Rpt: 4/85
2	FILER NAME Waldrop, Te	resa J. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00086011
4	Date 06/25/2025	Full name of contributor Alford, Matthew Contributor address; City; 9	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$1,500.00
		Houston, TX 77098-1870	6			
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Contributor's 6 Matt Alford L	employer/law firm .aw		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (if	any)	1		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)
	05/22/2025	Alsandor, Cheryl (Ms.) Contributor address; City;	State; Zip Code			\$500.00
		Houston, TX 77004		T		
		Principal Occupation		Contributor's Job Title		
_	Attorney	employer/law firm		Attorney Law firm of contributor's sp	20116	on (if any)
	The Alsando	• •		Law IIIII of Contributor's Sp	Jous	se (II ally)
_		s a child, law firm of parent(s) (if	anv)			
	oonanaata	o a orma, rarr mini or parorido) (ii	ca.,,,			
	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	05/19/2025	Asmus, Charlotte				\$2,500.00
		Contributor address; City; S Houston, TX 77056	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	The Rainwat	ter Firm				
	If contributor is	s a child, law firm of parent(s) (if	any)	•		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	1	Total pages Schedule A(J)1: Sch: 2/29 Rpt: 5/85		
2	FILER NAME Waldrop, Te	resa J. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00086011
4	Date 06/26/2025	Full name of contributor Asmus, Matthew Contributor address; City;	out-of-state PAC (ID#:			Amount of Contribution (\$) \$1,500.00
		Houston, TX 77024				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title CEO		
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
	Bendco Hou	ston Pipe Benders		The Rainwater Firm		
12	If contributor is	s a child, law firm of parent(s) (if	any)	•		
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/22/2025	Barker, Bethany Contributor address; City;	State; Zip Code			\$50.00
	O - stalle stands I	Deer Park, TX 77536		O antilla de ale Title		
	Paralegal	Principal Occupation		Contributor's Job Title Paralegal		
		employer/law firm		Law firm of contributor's sp	ากแร	se (if any)
		neberger, P.C.		Law iiiii or contributor 5 5	Jour	se (ii diiy)
_		s a child, law firm of parent(s) (if	anv)			
		, , , , , , , , , , , , , , , , , , , ,	,,			
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Т	Amount of Contribution (\$)
	06/23/2025	Barton Law Firm				\$2,000.00
		Contributor address; City; Houston, TX 77007	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	_	
	Continuators	-micipal Occupation		Contributor \$ 300 Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	<u>I</u>		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 3/29 Rpt: 6/85
2	FILER NAME Waldrop, Te	resa J. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00086011
4	Date 05/22/2025	5 Full name of contributor Bragg, Melanie6 Contributor address; City;	out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$250.00
		Houston, TX 77056				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Contributor's 6 Bragg Law F	employer/law firm PC		11 Law firm of contributor's sp	oous	se (if any)
12		s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	,	Т	Amount of Contribution (\$)
	05/20/2025	Brewer, Diane Contributor address; City;	<u> </u>		•	\$250.00
		Houston, TX 77006				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
		f Diane St. Yves, PLLC				
	If contributor is	s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)
	05/28/2025	Brock, Julie				\$1,000.00
		Contributor address; City; Houston, TX 77047	State; Zip Code		•	
	Contributor's F	I Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Law Firm of	Julie Brock				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE	A(J)1
	The Instruction Guide explains how to complete this form.					al pages Schedule A(J)1 h: 4/29 Rpt: 7/85	i:
2	FILER NAME Waldrop, Te	resa J. (The Honorable)			1	er ID (Ethics Commissi 086011	on Filers)
4	1 Date 5 Full name of contributor out-of-state PAC (ID#:		7 Am	oount of Contribution (\$)	\$1,500.00		
		Pearland, TX 77581-391	19				
8		Principal Occupation		9 Contributor's Job Title			
	Attorney			Attorney			
10		employer/law firm wn DBA Erinn G Brown Attoı	rney	11 Law firm of contributor's sp	oouse (it	any)	
12		s a child, law firm of parent(s) (i		L			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Am	ount of Contribution (\$)	
	06/26/2025	Brupbacher, Allyson Contributor address; City; Katy, TX 77450	State; Zip Code				\$1,500.00
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Attorney	Tincipal Occupation		Attorney			
-		employer/law firm		Law firm of contributor's sp	ouse (it	anv)	
		s Brupbacher			·		
	If contributor is	s a child, law firm of parent(s) (if	f any)	1			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Am	ount of Contribution (\$)	
	05/19/2025	Burgower, Wendy Contributor address; City;	State; Zip Code				\$500.00
		Houston, TX 77024		T			
	Contributor's I Attorney	Principal Occupation		Contributor's Job Title Attorney			
		employer/law firm		Law firm of contributor's sp	oouse (it	any)	
	Schlanger S				`	,	
	If contributor is	s a child, law firm of parent(s) (if	f any)	1			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A(J)1: Sch: 5/29 Rpt: 8/85
2	FILER NAME Waldrop, Te	LER NAME aldrop, Teresa J. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00086011	
4	Date 05/15/2025 5 Full name of contributor out-of-state PAC (ID#:) Carlin, Amy 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$5,000.00		
		Houston, TX 77002				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Contributor's of The Carlin L	employer/law firm aw Firm		11 Law firm of contributor's sp	ous	se (if any)
12		s a child, law firm of parent(s) (if	any)			
			,,			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/23/2025	Chapman, John (Mr.) Contributor address; City; S	State; Zip Code			\$300.00
		Houston, TX 77005				
		Principal Occupation		Contributor's Job Title		
	Real Estate			Appraiser		
		employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Brubaker & /					
	If contributor is	s a child, law firm of parent(s) (if	any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	05/22/2025	Clevenger Law Firm PC				\$500.00
		Contributor address; City; S	State; Zip Code		-	
		Spring, TX 77379		T		
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	1		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 6/29 Rpt: 9/85
2	FILER NAME Waldrop, Te	resa J. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00086011
4	Date 06/23/2025	5 Full name of contributor Cogdell, Dan6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$2,000.00
		Houston, TX 77002				
8		Principal Occupation		9 Contributor's Job Title		
_	Attorney			Attorney		
10	Contributor's e	employer/law firm Firm, PLLC		11 Law firm of contributor's sp	oous	e (if any)
12	! If contributor is	s a child, law firm of parent(s) (if	any)	I.		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	05/22/2025	Connolly, William Contributor address; City;	State; Zip Code			\$250.00
		Houston, TX 77098				
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm hneider Shireman		Law firm of contributor's sp	oous	e (II any)
_		s a child, law firm of parent(s) (if	anv)			
	ii contributor i	o a orma, law iiiii or parerido) (ii	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	06/25/2025	Crump, Grace	_			\$500.00
		Contributor address; City; Houston, TX 77008	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
	McKiernan C	Crump PC		Harris County District A	ttor	ney's Office
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 7/29 Rpt: 10/85
2	FILER NAME Waldrop, Te	resa J. (The Honorable)			1	Filer ID (Ethics Commission Filers) 00086011
4	Date 05/13/2025	5 Full name of contributor Cruz, Cervantes6 Contributor address; City;	out-of-state PAC (ID#:			Amount of Contribution (\$) \$100.00
		Houston, TX 77017				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10		employer/law firm . Cervantes PC		11 Law firm of contributor's sp	oouse	e (if any)
12		s a child, law firm of parent(s) (i	f any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/13/2025	Dale, Laura (Ms.) Contributor address; City;	State; Zip Code			\$500.00
		Houston , TX 77056				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse	e (if any)
	Laura Dale &	& Associates, P.C.				
	If contributor is	s a child, law firm of parent(s) (i	f any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	06/26/2025	Davari, Ali				\$1,500.00
		Contributor address; City;	State; Zip Code			
		Houston, TX 77257		_		
		Principal Occupation		Contributor's Job Title		
	Business ow			Business owner		(if any)
	Self	employer/law firm		Law firm of contributor's sp	oouse	e (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL CONTRIBUTI	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 8/29 Rpt: 11/85
2	FILER NAME Waldrop, Te	resa J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086011
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Dennis, Mysti 6 Contributor address; City; State; Zip Code Houston, TX 77036		7 Amount of Contribution (\$) \$100.00	
8	Contributor's I	I Principal Occupation	9 Contributor's Job Title	
	Attorney		Attorney	
10		employer/law firm on & Dennis, P.C.	11 Law firm of contributor's sp	pouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
	05/27/2025	Dicecco Law Partners PLLC Contributor address; City; State; Zip Code		\$3,000.00
	Cantuilantaula	Houston, TX 77057	Constributorio Joh Title	
	Contributors	Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's sp	pouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)
	06/26/2025	Fullenweider Wilhite Contributor address; City; State; Zip Code Houston , TX 77027		\$1,500.00
	Contributor's I	Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's sp	pouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL CONTRIBUT	ΓIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete th	is form.	1 Total pages Schedule A(J)1: Sch: 9/29 Rpt: 12/85
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Waldrop, Te	Waldrop, Teresa J. (The Honorable)		00086011
4	1 Date 5 Full name of contributor out-of-state PAC (ID#:) Gibson, Jason 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$1,500.00	
		Houston, TX 77098		
8	Contributor's	Principal Occupation	9 Contributor's Job Title Attorney	1
10	Contributor's	employer/law firm	11 Law firm of contributor's s	pouse (if any)
	The Gibson	Law Firm	The Gibson Law Firm	
12	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/26/2025 Gray Reed & McGraw LLP			\$3,000.00	
		Contributor address; City; State; Zip Code Houston, TX 77056		
	Contributor's	I Principal Occupation	Contributor's Job Title	_ L
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)	-	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/23/2025	Gregory Law PLLC		\$1,500.00
		Contributor address; City; State; Zip Code Houston, TX 77008-1757		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Contributors	Ринсіраї Оссираціон	Continuator's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains how t	to complete this f	orm.	1	Total pages Schedule A(J)1: Sch: 10/29 Rpt: 13/85
2	FILER NAME Waldrop Te	resa J. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00086011
4	Date 06/24/2025	5 Full name of contributor Hale, Hal 6 Contributor address; City; Stat	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$) \$1,500.00
		Houston, TX 77043				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	•	
	Attorney			Attorney		
10		employer/law firm		11 Law firm of contributor's sp		
	The Hale Fir			The Herrington Law Firr	n,	PC
12	! If contributor is	s a child, law firm of parent(s) (if an	у)			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)
	06/25/2025	Haston, Craig Contributor address; City; Stat	te; Zip Code		•	\$500.00
		Houston, TX 77070				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Attorney			Mediator		
		employer/law firm		Law firm of contributor's sp	ous	se (if any)
		Law Firm PC				
	If contributor is	s a child, law firm of parent(s) (if any	у)			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)
	06/25/2025	Herrington Hale, Cathy (Ms				\$1,500.00
		Contributor address; City; Stat Houston, TX 77043	te; Zip Code		•	
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney	o.pa. Goodpao.i		Attorney		
		employer/law firm		Law firm of contributor's sp	ous	se (if any)
	The Herringt			The Hale Firm, P.C.		
	If contributor is	s a child, law firm of parent(s) (if any	у)	I		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 11/29 Rpt: 14/85
2	FILER NAME Waldrop, Te	resa J. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00086011
4	Date 05/21/2025	5 Full name of contributor Hibler, Patricia6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$100.00
		Houston, TX 77092				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	10 Contributor's employer/law firmHibler & Associates, P.C.11 Law firm of contributor's sp			oous	se (if any)	
12		s a child, law firm of parent(s) (i	f any)	1		
L		T			_	
	Date Full name of contributor out-of-state PAC (ID#:) 05/22/2025 Hunt, Alexander Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$500.00		
		Katy, TX 77494				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)
			£ 0.00.0			
	ii contributor i	s a child, law firm of parent(s) (i	rany)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/25/2025	Imel, Taylor				\$1,500.00
		Contributor address; City;	State; Zip Code			
		Houston , TX 77056				
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
		Il & Associates				
	If contributor is	s a child, law firm of parent(s) (i	fany)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 12/29 Rpt: 15/85
2	FILER NAME Waldron Te	resa J. (The Honorable)			1	Filer ID (Ethics Commission Filers) 00086011
4	Date 05/28/2025	 5 Full name of contributor Joseph Indelicato, Jr. P. 6 Contributor address; City; \$ 			_	Amount of Contribution (\$) \$1,500.00
		Houston, TX 77098				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp			oous	e (if any)	
12	! If contributor is	s a child, law firm of parent(s) (if	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	05/19/2025	Joseph, Jane Contributor address; City; \$	State; Zip Code			\$150.00
		Houston , TX 77007-340	<u> </u>	I		
	Attorney	Principal Occupation		Contributor's Job Title Attorney		
		employer/law firm		Law firm of contributor's sp	20116	o (if any)
	Jane N Jose			Law iiiii oi contributoi 3 3	Jous	c (ii aiiy)
		s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/22/2025 Kelly L Fritsch, P.C. Contributor address; City; State; Zip Code Houston, TX 77007-8290				\$500.00	
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 13/29 Rpt: 16/85
2	FILER NAME Waldrop, Te	resa J. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00086011
4	Date 06/26/2025	5 Full name of contributor Kelly L Fritsch, P.C.6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$1,500.00
		Houston, TX 77007-829	0			
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp			oous	se (if any)	
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	06/24/2025 Kennedy, Anne Contributor address; City; State; Zip Code			\$1,500.00		
		Houston, TX 77008		_		
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Anne E Keni					
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/22/2025	Khoury, Denise	_			\$1,000.00
Contributor address; City; State; Zip Code						
	Contributor's I	Houston, TX 77063 Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney	ппсіраї Оссараноп		Attorney		
		employer/law firm		Law firm of contributor's sp	วดนะ	se (if any)
		do Khoury PC				(, ,
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this t	form.	1 Total pages Schedule A(J)1: Sch: 14/29 Rpt: 17/85
2	FILER NAME Waldrop, Te	resa J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086011
4	Date 05/23/2025			7 Amount of Contribution (\$) \$250.00
8	Contributor's I	Principal Occupation	9 Contributor's Job Title	
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp		ouse (if any)	
12	! If contributor is	s a child, law firm of parent(s) (if any)		
Date Full name of contributor out-of-state PAC (ID#:) 06/25/2025 Law Offices of David Sydow PLLC Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,500.00	
	Contributor's I	Houston, TX 77098 Principal Occupation	Contributor's Job Title	
	Contributor's 6	employer/law firm	Law firm of contributor's sp	ouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		
	Date 06/26/2025	Full name of contributor out-of-state PAC (ID#:_Law Offices of Joel A. Nass, P.C. Contributor address; City; State; Zip Code Houston, TX 77046-2480)	Amount of Contribution (\$) \$1,000.00
	Contributor's I	I Principal Occupation	Contributor's Job Title	I
	Contributor's e	employer/law firm	Law firm of contributor's sp	ouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 15/29 Rpt: 18/85
2	FILER NAME Waldrop, Te	resa J. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00086011
4	Date 05/22/2025	5 Full name of contributor Lee, Chung6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$500.00
		Houston, TX 77002				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
	Attorney Attorney					
10	10 Contributor's employer/law firm				` -,	
_		gal Group, PLLC		C.Y. Lee Legal Group, I	PLL	.C
12	! If contributor is	s a child, law firm of parent(s) (i	fany)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/27/2025 Legha, Arpita Contributor address; City; State; Zip Code		•	\$250.00		
		Cypress, TX 77433				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Oxner Legha					
	If contributor is	s a child, law firm of parent(s) (i	f any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	06/23/2025	Lewis, Chip				\$1,500.00
Contributor address; City; State; Zip Code			•			
	Contributor's I	Houston, TX 77019 Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney	тпера Оссираноп		Attorney		
		employer/law firm		Law firm of contributor's sp	าดนร	se (if any)
	Chip B Lewis					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 16/29 Rpt: 19/85
2	FILER NAME Waldrop, Te	resa J. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00086011
4	Date 05/22/2025			7 Amount of Contribution (\$) \$400.00	
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	
•	Attorney	· · · · · · · · · · · · · · · · · · ·		Attorney	
10	O Contributor's employer/law firm Parker Lewis Law PLLC		pouse (if any)		
12	If contributor i	s a child, law firm of parent(s) (if a	ny)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	05/13/2025 Lightman, Victoria Contributor address; City; State; Zip Code Stamford, CT 06901			\$100.00	
	Contributor's I	Principal Occupation		Contributor's Job Title	
	Retired	-ппстрат Оссирацоп		Retired	
		employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if a	ny)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	06/26/2025	Lilly, Earle Contributor address; City; Sta Houston, TX 77056	ate; Zip Code		\$1,500.00
	Contributor's I	Principal Occupation		Contributor's Job Title	
	Attorney			Attorney	
Contributor's employer/law firm Law firm of contributor's sp			oouse (if any)		
	Lilly & Van N	less, LLP			
	If contributor i	s a child, law firm of parent(s) (if a	ny)		

	MONET	ARY POLITICAL (CONTRIBUTIO	DNS		SCHEDULE A(J)1
	The Instru	ction Guide explains hov	v to complete this f	orm.	1	Total pages Schedule A(J)1: Sch: 17/29 Rpt: 20/85
2	FILER NAME Waldrop, Te	resa J. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00086011
4	Date 05/20/2025	5 Full name of contributor Marks, Harvey (Mr.)6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$) \$250.00
		Houston , TX 77055				
8	Contributor's Retired	Principal Occupation		9 Contributor's Job Title Retired		
10		employer/law firm		11 Law firm of contributor's sp	OUS	se (if any)
				, ,	(i. di.))	
12	! If contributor i	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/20/2025	McLerran, Susan Contributor address; City; S	itate; Zip Code			\$2,500.00
		Houston, TX 77027		T - "		
	Contributor's I	Principal Occupation		Contributor's Job Title Attorney		
-		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Fullenweide					(1, 7)
	If contributor is	s a child, law firm of parent(s) (if	any)	I		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/22/2025	McNamara Law Office Pl Contributor address; City; S			-	\$500.00
		Kingwood, TX 77339				
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	L		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 18/29 Rpt: 21/85
2	FILER NAME Waldrop, Te	resa J. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00086011
4	Date 05/28/2025	5 Full name of contributor Merchant, Shelly (Ms.)6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$500.00
		Deer Park, TX 77536				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	10 Contributor's employer/law firm James C. Henry III			ous	se (if any)	
12		s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/22/2025 Moon, Tammy Contributor address; City; State; Zip Code			\$500.00		
	Contributor's F	Houston, TX 77004 Principal Occupation		Contributor's Job Title		
	Attorney	iniopai Goodpaion		Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Schlanger S	ilver				
	If contributor is	s a child, law firm of parent(s) (i	f any)	•		
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/21/2025	Myres, Susan	_			\$500.00
Contributor address; City; State; Zip Code Houston, TX 77046						
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney	molpai Goddpailon		Attorney		
		employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Myres & Ass	sociates				
	If contributor is	s a child, law firm of parent(s) (i	fany)	•		

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1	
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 19/29 Rpt: 22/85	=
2	FILER NAME Waldrop, Te	resa J. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00086011	
4	Date 06/27/2025	–		7 Amount of Contribution (\$) \$1,500.0	–)	
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		_
Ū		Attorney Attorney				
10	0 Contributor's employer/law firm Bo Nichols Law PLLC 11 Law firm of contributor's spo		pouse (if any)			
12	If contributor is	s a child, law firm of parent(s) (if an	у)			_
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	=
	05/22/2025 O'Neil Wysocki PC Contributor address; City; State; Zip Code Frisco, TX 75034			\$1,000.0)	
	Contributor's I	Principal Occupation		Contributor's Job Title		_
	Continuator 5 i	-ппстрат Оссираціон		Continuator's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if an	у)			_
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	=
	05/29/2025	O'Neill, Alice (Ms.) Contributor address; City; Sta Houston, TX 77007	te; Zip Code		 *250.0)
	Contributor's F	Principal Occupation		Contributor's Job Title	•	
	Attorney			Attorney		
	Contributor's employer/law firm Law firm of contributor's sp			pouse (if any)		
	The O'Neill L	Law Firm, PLLC				
	If contributor is	s a child, law firm of parent(s) (if an	y)			
						-

	MONET	ARY POLITICAL C	CONTRIBUTIO	ONS			SCHEDULE	A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1		ges Schedule A(J)1 /29 Rpt: 23/85	L:
2	FILER NAME				3	Filer ID	(Ethics Commissi	on Filers)
	Waldrop, Te	resa J. (The Honorable)				000860	11	
4	Date 05/20/2025	Full name of contributorPerez, AmyContributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code		7	Amount	of Contribution (\$)	\$500.00
		Spring, TX 77379						
8	Contributor's I	Principal Occupation		9 Contributor's Job Title				
	Attorney			Attorney				
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pou	se (if any)		
	Amy Thoma	s Perez Law Firm, PC						
12	If contributor i	s a child, law firm of parent(s) (if a	ny)					
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount	of Contribution (\$)	
	06/26/2025	Rainwater & Associates P	—				. ,	\$1,500.00
		Contributor address; City; St	ate: Zip Code					
	Contributor's I	Houston, TX 77056 Principal Occupation		Contributor's Job Title				
	Contributor's	employer/law firm		Law firm of contributor's s	pou	se (if any)		
	If contributor i	s a child, law firm of parent(s) (if a	iny)					
	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount	of Contribution (\$)	
	06/24/2025	Ricardo L Ramos PLLC	_ ` -				. ,	\$1,500.00
		Contributor address; City; St	ate; Zip Code					
		Houston, TX 77019						
	Contributor's I	Principal Occupation		Contributor's Job Title				
	Contributor's	employer/law firm		Law firm of contributor's s	pou	se (if any)		
	If contributor i	s a child, law firm of parent(s) (if a	iny)					

	MONET	ARY POLITICAL CONTRIBUT	TONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete thi	is form.	1 Total pages Schedule A(J)1: Sch: 21/29 Rpt: 24/85
2	FILER NAME Waldrop, Te	resa J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086011
4	Date 05/22/2025			7 Amount of Contribution (\$) \$350.00
8	Contributor's F	I Principal Occupation	9 Contributor's Job Title	1
	Attorney		Attorney	
10		employer/law firm	11 Law firm of contributor's s	pouse (if any)
		m Of Ivy V. Ricketts	Elton R Lockings PC	
12		s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor ut-of-state PAC (I	D#:)	Amount of Contribution (\$)
	05/20/2025	Runge, Barbara Contributor address; City; State; Zip Code Houston, TX 77005		\$500.00
	Contributor's F	I Principal Occupation	Contributor's Job Title	1
	Attorney	· ·	Attorney	
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
	Law Firm of	Barbara Runge		
	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor ut-of-state PAC (I	D#:)	Amount of Contribution (\$)
	05/12/2025	Ryerson, Mary Ann (Ms.) Contributor address; City; State; Zip Code Houston, TX 77008		\$25.00
	Contributor's F	I Principal Occupation	Contributor's Job Title	1
	Retired		Retired	
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 22/29 Rpt: 25/85
2	FILER NAME Waldrop, Te	resa J. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00086011
4	Date 05/12/2025	5 Full name of contributorRyerson, Mary Ann (Ms.6 Contributor address; City;			7	Amount of Contribution (\$) \$250.00
		Houston, TX 77008				
8		Principal Occupation		9 Contributor's Job Title		
10	Retired	employer/law firm		Retired 11 Law firm of contributor's sp	ากแร	e (if any)
10	Continuator 5 6	employemaw liim		11 Law IIIII of Continution 5 Sp	Jous	e (II aliy)
12	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/23/2025 S. Selsberg Law PLLC Contributor address; City; State; Zip Code				\$1,500.00	
		Houston , TX 77098				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/04/2025	Shapiro, Stefani				\$250.00
Contributor address; City; State; Zip Code Houston, TX 77098						
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Schlanger S			Dow Golub		
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	1	Total pages Schedule A(J)1: Sch: 23/29 Rpt: 26/85		
2	FILER NAME Waldrop, Te	resa J. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00086011
4	Date 05/20/2025			7	Amount of Contribution (\$) \$750.00	
		Houston, TX 77084				
8		Principal Occupation		9 Contributor's Job Title		
_	Attorney			Attorney		
10		employer/law firm of Thomas Singleton, PLLC		11 Law firm of contributor's sp	oous	se (If any)
12		s a child, law firm of parent(s) (if	any)			
_	Date	Full name of contributor	out-of-state PAC (ID#:)	I	Amount of Contribution (\$)
	06/23/2025 Skillern Firm Contributor address; City; State; Zip Code			\$1,500.00		
		Houston , TX 77024				
	Contributor's I	Principal Occupation		Contributor's Job Title		
Contributor's employer/law firm Law			Law firm of contributor's sp	oous	se (if any)	
	If contributor is	s a child, law firm of parent(s) (i	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/15/2025	Sloane, Ellen (Ms.) Contributor address; City;	State; Zip Code			\$100.00
		Houston, TX 77057				
H	Contributor's F			Contributor's Job Title		
	Contributor's Principal Occupation Contributor's Job Title Retired Retired					
			Law firm of contributor's sp	oous	se (if any)	
	If contributor is	s a child, law firm of parent(s) (i	any)			

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A(J)1			
	The Instruction Guide explains how to complete this form.				1	ges Schedule A(J)1 /29 Rpt: 27/85	:
2	FILER NAME Waldrop, Te	resa J. (The Honorable)			3 Filer ID 000860	(Ethics Commission	on Filers)
4	Date 05/22/2025	5 Full name of contributor out-of-state PAC (ID#:) Stagg, R. Nicole 6 Contributor address; City; State; Zip Code Houston, TX 77002			7 Amount	of Contribution (\$)	\$100.00
8	Contributor's I	IPrincipal Occupation		9 Contributor's Job Title	<u> </u>		
•	Attorney	imolpai o occupation		Attorney			
10	Contributor's	employer/law firm ssociates, PLLC		11 Law firm of contributor's sp	oouse (if any)		
12	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount	of Contribution (\$)	
	05/20/2025 Stout, Angela (Ms.) Contributor address; City; State; Zip Code Houston, TX 77008			(,)	\$500.00		
	Contributor's F	IPrincipal Occupation		Contributor's Job Title	<u> </u>		
			Attorney				
Contributor's employer/law firm			Law firm of contributor's sp	ouse (if anv)			
The Stout Law Firm, PLLC				The Curley Law Firm, P			
		s a child, law firm of parent(s) (if any)		<u>`</u>			
	Date	Full name of contributor	out-of-state PAC (ID#:_		Amount	of Contribution (\$)	
	05/20/2025	The Herrington Law Firm PC Contributor address; City; State; REDACTED PER 254.03					\$1,500.00
	Contributor's I	Principal Occupation		Contributor's Job Title			
Contributor's employer/law firm			Law firm of contributor's sp	oouse (if any)			
	If contributor is	s a child, law firm of parent(s) (if any)					

	MONET	ARY POLITICAL CONT	RIBUTIC	DNS		SCHEDULE A(J)1
	The Instru	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A(J)1: Sch: 25/29 Rpt: 28/85
2	FILER NAME Waldrop, Te	resa J. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00086011	
4	Date 05/22/2025	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$1,000.00
		Houston, TX 77017		-		
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	ous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if any)				
F	Date	Full name of contributor out-of-	state PAC (ID#:_)	Ι	Amount of Contribution (\$)
	05/22/2025 The Law Office of Dan-Phi V. Nguyen, PLLC Contributor address; City; State; Zip Code				\$500.00	
		Houston, TX 77002-2069		I		
	Contributor's F	Principal Occupation		Contributor's Job Title		
Contributor's employer/law firm				Law firm of contributor's sp	ous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-of-	state PAC (ID#:_)		Amount of Contribution (\$)
	05/15/2025	Thrash, Christine Contributor address; City; State; Zip Co	ode			\$500.00
_	Contributor's F			Contributor's Job Title		
	Attorney	· · · ·				
	Contributor's employer/law firm Law firm of contributor's s			Law firm of contributor's sp	ous	se (if any)
	Law Office o	f Christine R. Thrash, PLLC				
	If contributor is	s a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1	
	The Instru	ction Guide explains ho	w to complete this	form.		ages Schedule A(J)1: 26/29 Rpt: 29/85	=
2	FILER NAME Waldron Te	resa J. (The Honorable)			3 Filer ID 00086	(Ethics Commission Filers)	
4	Date 06/25/2025	5 Full name of contributor out-of-state PAC (ID#:)			nt of Contribution (\$) \$1,000.0	0	
		Spring, TX 77386					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
	Attorney			Attorney			
10		employer/law firm _aw Group, P.C.		11 Law firm of contributor's sp	oouse (if any	у)	
12		s a child, law firm of parent(s) (i	f any)				_
	. Il contributor i	s a clina, law iiiii oi paichi(s) (i	i aliy)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amour	nt of Contribution (\$)	=
	05/22/2025	Tran, Thao	_			\$100.0	0
		Contributor address; City;	State; Zip Code				
		Houston, TX 77002					
	Contributor's Principal Occupation Contributor's Job Title						
	Attorney						
	Contributor's employer/law firm Law firm of contributor's			Law firm of contributor's sp	oouse (if any	y)	
	The Law Off	ices of Thao T. Tran					
	If contributor is	s a child, law firm of parent(s) (i	f any)				
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Amour	nt of Contribution (\$)	=
	06/25/2025	Van Ness, John	_			\$3,000.0	0
		Contributor address; City;	State; Zip Code				
		Houston, TX 77027					
		Principal Occupation		Contributor's Job Title			
	Attorney			Attorney			
		employer/law firm		Law firm of contributor's sp		y)	
	Lilly & Van N	less LLP		Law Office of Jeanne M	IcDowell		
	If contributor is	s a child, law firm of parent(s) (i	f any)				
							_

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 27/29 Rpt: 30/85
2	FILER NAME Waldron Te	resa J. (The Honorable)			1	Filer ID (Ethics Commission Filers) 00086011
4	Date 06/26/2025	5 Full name of contributor out-of-state PAC (ID#:) 7		_	Amount of Contribution (\$) \$1,000.00	
		Milwaukee, WI 53203-24	109			
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Restaurateu	r/Real Estate Investor		Owner		
10	Contributor's of MOS R.E., L	employer/law firm LC		11 Law firm of contributor's sp	oous	e (if any)
12		s a child, law firm of parent(s) (i	any)	L		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/23/2025	Waddell, Lauren Contributor address; City;	State; Zip Code			\$500.00
		Houston, TX 77046				
	Contributor's Principal Occupation Contributor's Job Title		•			
	Attorney					
	Contributor's employer/law firm Law firm of contributor's			oous	e (if any)	
Waddell Law Firm P.C. Kean Miller						
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/24/2025	Waddell, Lauren	_			\$1,500.00
		Contributor address; City; Houston, TX 77046	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Waddell Lav	/ Firm PC		Kean Miller		
	If contributor is	s a child, law firm of parent(s) (if	any)	I		

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.				1 Total pages Schedule A(J)1: Sch: 28/29 Rpt: 31/85
2	FILER NAME Waldrop, Te	resa J. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00086011
4	Date 05/12/2025			7 Amount of Contribution (\$) \$25.00	
_		Houston, TX 77001		0.0.17.1.7.1.77	
8		Principal Occupation		9 Contributor's Job Title	
40	Judge			Judge	(, , , , ,)
10	State Judicia	employer/law firm ary		11 Law firm of contributor's sp	oouse (If any)
12	If contributor is	s a child, law firm of parent(s) (if an	y)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	05/22/2025 Walter, Teri Contributor address; City; State; Zip Code		\$100.00		
		Houston, TX 77008			
	Contributor's Principal Occupation Contributor's Job Title				
Attorney			-		
Contributor's employer/law firm Law firm of contrib Walter Law Firm PC			Law firm of contributor's sp	oouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if an	у)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	05/22/2025	Yates, Trey (Mr.) Contributor address; City; State Houston, TX 77027	te; Zip Code		\$750.00
	Contributor's F	Principal Occupation		Contributor's Job Title	•
Attorney Attor		Attorney			
Contributor's employer/law firm Law firm of o			Law firm of contributor's sp	oouse (if any)	
	Trey Yates L	aw			
	If contributor is	s a child, law firm of parent(s) (if an	y)		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A(J)1		
	The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 29/29 Rpt: 32/85		
2	FILER NAME Waldrop, Te	resa J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086011		
4	Date 06/26/2025			7 Amount of Contribution (\$) \$1,500.00		
8	Contributor's I	I Principal Occupation	9 Contributor's Job Title	<u> </u>		
	Attorney	· por · · · · · · · ·	Attorney			
10		employer/law firm _aw	11 Law firm of contributor's sp	pouse (if any)		
12		s a child, law firm of parent(s) (if any)				
_	Date	Full name of contributor	4.	Amount of Contribution (\$)		
	05/22/2025 Zimmerman Family Law PLLC Contributor address; City; State; Zip Code		\$250.00			
	Contributorio	Webster, TX 77598	Contributor's Job Title			
	Continuator S i	Principal Occupation	Contributor's Job Title			
Contributor's employer/law firm		employer/law firm	Law firm of contributor's spouse (if any)			
	If contributor i	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)		
	05/22/2025	Zwernemann, Allen (Mr.) Contributor address; City; State; Zip Code Houston, TX 77009		\$312.00		
	Contributor's I	Principal Occupation	Contributor's Job Title			
Attorney		Attorney				
			Law firm of contributor's sp	pouse (if any)		
		mann Law Firm				
	If contributor i	s a child, law firm of parent(s) (if any)				

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 33/85 FILER NAME 3 Filer ID (Ethics Commission Filers) Waldrop, Teresa J. (The Honorable) 00086011 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 06/26/2025 Newman, Bobby \$4,823.01 | Food & Beverage for 7 Contributor address; City; State; Zip Code dinner fundraiser held at King Steak on 6-26-2025 Houston, TX 77098 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) Bobby K Newman, P.C. 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

	LOANS (J	UDICIAL)			SCHEDULE E(J)
	The Instruction	The Instruction Guide explains how to complete this form.			ges Schedule E(J): 2 Rpt: 34/85
2	FILER NAME Waldrop, Teresa	a J. (The Honorable)		3 Filer ID 000860	(Ethics Commission Filers)
4	TOTAL OF UN	IITEMIZED LOANS			\$
5	Date of loan 02/08/2025	7 Name of lender out-of-state PA Waldrop, Teresa	C (ID#:)	9 Loan Amount (\$) \$1,000.00
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate
	No	Houston, TX 77001			11 Maturity Date
12	Lender's Principal	Occupation	13 Lender's Job Title		
	Judge		Presiding Judge, 312th	District Cou	urt
14	Lender's Employer State Judiciary	r/Law Firm	15 Law Firm of lender's spous	se (if any)	
16	If lender is child, la	w firm of parent(s) (if any)			
17	Description of Coll	ateral	18 Check if personal funds we	ere deposited	d into political account (See Instructions)
19	GUARANTOR INFORMATION	20 Name of guarantor			22 Amount Guaranteed (\$)
	X not applicable	21 Guarantor address; City; State;	Zip Code		
23 Guarantor's Principal Occupation			24 Guarantor's Job Title		
25 Guarantor's Employer/Law Firm			26 Law Firm of guarantor's sp	ouse (if any)	
27	If guarantor is child	d, law firm of parent(s) (if any)	•		

	LOANS (J	UDICIAL)			SCHEDULE E(J)
	The Instruction	The Instruction Guide explains how to complete this form.			ges Schedule E(J): 2 Rpt: 35/85
2	FILER NAME Waldrop, Teresa	ı J. (The Honorable)		3 Filer ID 000860	(Ethics Commission Filers)
4	TOTAL OF UN	ITEMIZED LOANS			\$
5	Date of loan 03/16/2025	7 Name of lender out-of-state PA Waldrop, Teresa	C (ID#:)	9 Loan Amount (\$) \$1,000.00
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate
	No	Houston, TX 77001			11 Maturity Date
12	Lender's Principal	Occupation	13 Lender's Job Title		
	Judge		Presiding Judge, 312th		ırt
14	Lender's Employe State Judiciary	r/Law Firm	15 Law Firm of lender's spous	e (if any)	
16	If lender is child, la	w firm of parent(s) (if any)			
17	Description of Coll X None	ateral	18 Check if personal funds we	ere deposited	l into political account (See Instructions)
19	GUARANTOR INFORMATION	20 Name of guarantor			22 Amount Guaranteed (\$)
23	X not applicable Guarantor's Princi	21 Guarantor address; City; State; pal Occupation	Zip Code Zip Code		
25 Guarantor's Employer/Law Firm			26 Law Firm of guarantor's sp	ouse (if any)	
27	If guarantor is child	d, law firm of parent(s) (if any)			

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/36 Rpt: 36/85	Waldrop, Teresa J. (The Honorable) 00086011
4	Date	5 Payee name
	05/05/2025	Amano McGann
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.00	2740 Arthur Street
		Roseville, MN 55113
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Parking for Houston Young Lawyers Foundation Law
		Day event
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiordine to berieff C/O	1
	Date	Payee name
	02/24/2025	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$82.23	410 Terry Avenue North
		Seattle, WA 98109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense 2 thermal coffee carafes & coffee cups for counsel
		tables in main courtroom
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
	Date	Pouso nome
	02/10/2025	Payee name Area 5 Democrats
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	3800 Spencer Hwy
		Suite L
		Pasadena, TX 77504
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		, under land aloo
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/36 Rpt: 37/85	Waldrop, Teresa J. (The Honorable) 00086011
4	Date	5 Payee name
	02/18/2025	Area 5 Democrats
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.00	3800 Spencer Hwy
		Suite L
		Pasadena, TX 77504
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Membership dues
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/25/2025	Area 5 Democrats
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	3800 Spencer Hwy
		Suite L
		Pasadena, TX 77504
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Judges table at fundraising brunch
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/24/2025	CB2
	Amount (\$)	Payee address; City; State; Zip Code
	\$52.93	1315 N North Branch St
		Chicago, IL 60642
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense 2 rubber-coated tissue box covers for counsel tables
		in main courtroom
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Evaccounting/Banking Fe Consulting Expense Fo Contributions/ Donations Made By - Gi

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
<u> </u>	Total manage Calcadala 54	
1	Total pages Schedule F1: Sch: 3/36 Rpt: 38/85	2 FILER NAME Waldrop, Teresa J. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00086011
4	Date	5 Payee name
	03/24/2025	Constant Contact
6	Amount (\$) \$351.64	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EAFENDITORE	Check if Austin, TX, officeholder living expense Design software annual subscription renewal
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/27/2025	Costco
	Amount (\$)	Payee address; City; State; Zip Code
	\$72.75	3836 Richmond Ave
		Houston , TX 77027
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taxes, Complete Schedule T
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Postage stamps
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/23/2025	Dixon, Jose (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$120.00	7715 Audubon Forest Lane
		Humble, TX 77396
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		GOTV work at Campaign Kickoff fundraiser
		OCT V WORK at Campaign Nickon failulaisei
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Cabadula E4:	· · · · · · · · · · · · · · · · · · ·	—
1	Total pages Schedule F1: Sch: 4/36 Rpt: 39/85	2 FILER NAME Waldrop, Teresa J. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00086011	
4	Date	5 Payee name	
	04/25/2025	El Bolillo Bakery	
6	Amount (\$) \$35.00	7 Payee address; City; State; Zip Code 2421 South Wayside Drive Houston, TX 77023	
Ļ	DUDDOCE		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Cake for celebration of 312th AJ court reporter R Kocurek's birthday	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
	Date	Payee name	
	02/10/2025	Givebutter	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$62.10	Givebutter.com	
		DE	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder/Political Committee	n'e
		Mardi Gras Party	13
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	01/06/2025	H-E-B	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$24.82	1701 West Alabama	
	Ψ24.02	1701 West Alabama	
		Houston , TX 77098	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Cake & card for 312th Bailiff D Durden birthday celebration	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experience to beliefit 6/01		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
_	Total names Oct 11 51	<u> </u>	0.40/
1	Total pages Schedule F1: Sch: 5/36 Rpt: 40/85	2 FILER NAME Waldrop, Teresa J. (The Honorable) 3 Filer ID (Ethics Commission File 00086011	ers)
4	Date	5 Payee name	
	04/03/2025	H-E-B	
L	04/03/2023		
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$60.03	1701 West Alabama	
		Houston , TX 77098	
Ļ	PURPOSE		
8	OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Card, cake & utensils for 312th Bailiff R Waller	
		birthday celebration	
Ļ			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L	experience to beliefft C/Of	··	
	Date	Payee name	
	04/23/2025	H-E-B	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$101.47	1701 West Alabama	
	Ψ±0±.¬1		
		14 TV 77000	
		Houston , TX 77098	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	1104
		2025 Admin Professionals Day celebration for 3 Court Coordinator	ıı∠tn
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
L	expenditure to benefit C/O	п	
	Date	Payee name	
	06/01/2025	H-E-B	
	Amount (\$)	Payee address; City; State; Zip Code	
	` ,	1701 West Alabama	
	\$10.26	TIOT MEST VIGNALIIA	
L		Houston , TX 77098	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
	EAPENDITURE	Check if Austin, TX, officeholder living expense	
		Utensils for Harris County District & County 202	5
		Summer interns luncheon	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	Н	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica		nmittee Legal Services Salaries/Wages/Contract I	Labor		OTHER (enter a	category not listed above)	
	Credit Card Payment		The Instruction Guide explains how to complete this fo	orm.				
1	Total pages Schedule F1:	2	FILER NAME	3		Filer ID	(Ethics Commission File	ers)
	Sch: 6/36 Rpt: 41/85		Waldrop, Teresa J. (The Honorable)			00086011		
4	Date	5	Payee name	<u> </u>				
	06/03/2025		Harland Clarke Corp					
-		-	·					
6	Amount (\$) \$42.16	 ′						
	Ф42.10		15955 La Cantera Parkway					
			San Antonio, TX 78256					
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule) (b) Descrip	ption				
	OF EXPENDITURE		Office Overhead/Rental Expense				plete Schedule T.	
	LAI LINDITORL					officeholder living		
			Reord	ler - checi	KS	for Wells I	argo campaign acct	t
9	Complete ONLY if direct		Candidate/Officeholder name Office sought			Office he	eld	
	expenditure to benefit C/OI	П						
	Date		Payee name					
	01/09/2025		Harris County Democratic Party					
	Amount (\$)	\vdash	Payee address; City; State; Zip Code					
	\$30.00		3302 Canal St					
	φοσ.σσ							
			Houston TV 77000					
			Houston, TX 77003					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule) (b) Descrip					
	EXPENDITURE		Contributions/Donations Made by			e of Texas. Com officeholder living	plete Schedule T.	
							ship contribution	
				ny odotan		ig mombon	omp continuation	
	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office sought			Office he	ald	
	expenditure to benefit C/OI		andidate/Onicendider name Onice sought			Office H	siu	
		_						
	Date		Payee name					
	02/10/2025		Harris County Democratic Party					
	Amount (\$)		Payee address; City; State; Zip Code					
	\$30.00		3302 Canal St					
			Houston, TX 77003					
	PURPOSE	(a)		ntion				
	OF	(۳)			tsid	e of Texas. Com	plete Schedule T.	
	EXPENDITURE		Continuations/Donations Made By			officeholder living		
			_	ıly sustain	nir	ng members	ship contribution	
	Complete ONLY if direct		Candidate/Officeholder name Office sought			Office he	eld	
	expenditure to benefit C/OI		•					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica		ittee Legal Services Salarie		ense ges/Contract Labor		OTHER (enter a	category not listed abov	re)
	Credit Card Payment		The Instruction Guide explains how to	com	plete this form.				
1	Total pages Schedule F1:	2 F	LER NAME			3	Filer ID	(Ethics Commission	n Filers)
	Sch: 7/36 Rpt: 42/85	l۷	/aldrop, Teresa J. (The Honorable)				00086011		
4	Date	5 F	ayee name						
	03/10/2025	ı	arris County Democratic Party						
6	Amount (\$)		ayee address; City; State; Zip	Code					
٠	\$30.00	l	302 Canal St	Cour	C				
	φου.σσ	`	502 Gariai Gi						
		١.	oueter TV 77002						
			ouston, TX 77003						
8	PURPOSE OF		ategory (See Categories listed at the top of this schedule)	(I	b) Description				
	EXPENDITURE		ontributions/Donations Made By andidate/Officeholder/Political Committee				de of Texas. Com officeholder living		
			andidate/Onicendiden/Political Committee		Monthly susta				
					,		J	•	
9	Complete ONLY if direct	l Ca	ndidate/Officeholder name Office s	onal	ht		Office he	eld .	
-	expenditure to benefit C/OI			9-					
	Date	-							
	03/17/2025	l	ayee name arris County Democratic Party						
		_							
	Amount (\$)	l	ayee address; City; State; Zip	Code	e				
	\$75.00	ا ا	302 Canal St						
			ouston, TX 77003						
	PURPOSE OF		ategory (See Categories listed at the top of this schedule)	(I	b) Description				
	EXPENDITURE		ontributions/Donations Made By andidate/Officeholder/Political Committee		<u> </u>		de of Texas. Com officeholder living		
		'	andidate/Onicendiden/Political Committee		2 HCDP nam			схренос	
							J		
	Complete ONLY if direct	L Ca	ndidate/Officeholder name Office s	ough	ht		Office he	eld	
	expenditure to benefit C/OI	Н		Ū					
	Date		ayee name						
	04/09/2025	ı	arris County Democratic Party						
	Amount (\$)		ayee address; City; State; Zip	Code					
	\$30.00	l	302 Canal St	Cour	C				
	φου.σσ	`	502 Gariai Gi						
		١.	ouston, TX 77003						
	D. 100.00			10					
	PURPOSE OF		ategory (See Categories listed at the top of this schedule)	(1	b) Description Check if travel	nute	de of Texas. Com	nlete Schedule T	
	EXPENDITURE		ontributions/Donations Made By andidate/Officeholder/Political Committee		<u></u>		officeholder living		
		`	anarato, emecheraci, entreal committee		Sustaining m				
	Complete ONLY if direct		ndidate/Officeholder name Office s	ough	ht		Office he	eld	
	expenditure to benefit C/OI	Н							

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Ļ		1
1	Total pages Schedule F1:	
	Sch: 8/36 Rpt: 43/85	Waldrop, Teresa J. (The Honorable) 00086011
4	Date	5 Payee name
	05/09/2025	Harris County Democratic Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$30.00	3302 Canal St
	,	
		Hauston TV 77002
		Houston, TX 77003
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		Monany Sustaining membership contribution
Ļ	Operation ONLY if allowed	One distribute 10ff and halden assets of the second to the
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/02/2025	Harris County Democratic Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	3302 Canal St
		Houston, TX 77003
	PURPOSE	1
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		HarCo Family District Court Judges sponsorship of
		food/drinks at CEC quarterly meeting.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
-	Date	Payae name
	06/12/2025	Payee name Harris County Democratic Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	3302 Canal St
		Houston, TX 77003
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITURE	Check if Austin, TX, officeholder living expense
		2d contrib - HarCo Family District Court Judges sponsorship of food/drinks at CEC quarterly meeting.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 9/36 Rpt: 44/85	Waldrop, Teresa J. (The Honorable) 00086011
4	Date	5 Payee name
	06/09/2025	Harris County Democratic Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$30.00	3302 Canal St
		Houston, TX 77003
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Sustaining membership
	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
_		
	Date	Payee name
	02/18/2025	Hispanic Bar Association
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	P.O. Box 3611
		Houston , TX 77253-3611
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership dues
		Wellibership dues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· ·
	Date	Davisa nama
	02/25/2025	Payee name Houston Black American Democrats
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	www.houstonblackdems.org
		Houston, TX 77002
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		2023 Illidential Wolfielt Branch
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica			_egal Services	s Expense	Salaries/W		e /Contract Labor		OTHER (enter	a category not listed a	bove)
	Credit Card Payment			The Instruction G	uide explains l	now to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 10/36 Rpt: 45/85		Waldrop, Te	resa J. (The F	lonorable)					00086011		
4	Date	5	Payee name						<u> </u>			
	01/15/2025	ı		BTQ+ Political	Caucus							
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Co	de					
	\$40.00		Post Office E	3ox 66664								
			Houston, TX	77266-6664								
8	PURPOSE	\vdash		e Categories listed at	the ten of this eabs	adula)	(b)	Description				
ľ	OF			s/Donations M		eaule)	(~)	_ `	outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITURE			fficeholder/Po		ittee		Check if Austin	, TX,	officeholder livir	ng expense	
								Membership	ren	ewal dues		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	eholder name	0	office sou	ght			Office h	neld	
	experiorare to benefit C/O	''										
	Date		Payee name									
	04/18/2025		Houston Lav	vyers Associat	ion							
	Amount (\$)		Payee addres	s; City;	State;	Zip Co	de					
	\$220.00		P.O. Box 30	0009								
			Houston, TX	〈 77230								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE			s/Donations M	,			=			mplete Schedule T.	
	-		Candidate/C	fficeholder/Po	litical Commi	ittee				officeholder livir	ng expense strict Judges ta	able at
								2025 HLA Ga		ani Law Di	strict struges to	ibic at
	Complete ONLY if direct	<u> </u>	Candidate/Offic	eholder name	0	Office sou	aht			Office h	neld	
	expenditure to benefit C/OI		taliadato, o mo	onoraer mame	J		9			000 .		
-	Date	Г	Payoo namo									
	06/30/2025	ı	Payee name Houston Lav	vyers Associat	ion							
	Amount (\$)	├	Payee addres			Zip Co	do					
	\$70.00	ı	P.O. Box 30	, ,,	State,	Zip Co	ue					
	Ψ10.00		1 .O. DOX 30	0000								
			Houston, TX	/ 77220								
	DUDDOOF	-				- 1	(1-)					
	PURPOSE OF			e Categories listed at s/Donations M		edule)	(a)	Description Check if travel	outsi	de of Texas, Co	mplete Schedule T.	
	EXPENDITURE			officeholder/Po		ittee				officeholder livir		
								Membership	ren	ewal dues		
	Complete ONLY if direct		Candidate/Offic	eholder name	0	office sou	ght			Office h	neld	
L	expenditure to benefit C/OI	H _					_		_			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica			egal Services		Salaries/W		e /Contract Labor		OTHER (enter a	strict a category not listed abo	ove)
	Credit Card Payment			The Instruction Gเ	iide explains ho	w to con	nple	te this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission	on Filers)
	Sch: 11/36 Rpt: 46/85		Waldrop, Te	resa J. (The H	onorable)					00086011		
4	Date	5	Payee name									
	02/10/2025			erican Bar Asso	ociation Hous	ston						
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Coo	de					
	\$75.00		P.O. BOX 30)3								
			Houston, T	K 77001-0303								
8	PURPOSE	(a)	Category (so	e Categories listed at th	o top of this schod	ulo)	(b)	Description				
	OF			s/Donations Ma		uie)	` '	_ `	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE			fficeholder/Poli		:ee		—		officeholder livin	g expense	
								Membership (due	es		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Offic	eholder name	Offi	ice souç	ght			Office h	eld	
	Date	l	Payee name									
	05/15/2025		Meyerland A	rea Democrat (Club							
	Amount (\$)		Payee addres		State;	Zip Coo	de					
	\$21.00		PO Box 310	061								
			Houston, T	K 77231								
	PURPOSE	(a)	Category (See	e Categories listed at th	ne top of this schedu	ule)	(b)	Description				
	OF EXPENDITURE			s/Donations Ma	,			=		de of Texas. Con officeholder livin	nplete Schedule T.	
			Candidate/O	fficeholder/Poli	ucai Commiu	.ee		Annual memb			y expense	
	Complete ONLY if direct	C	Candidate/Offic	eholder name	Offi	ice soug	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
_	Date		Payee name									
	02/16/2025	l	•	Association Hou	uston							
	Amount (\$)		Payee addres	s; City;	State;	Zip Cod	de					
	\$40.00	l	•	mbahouston.or								
			·		-							
			Houston, TX									
	PURPOSE			e Categories listed at th	a tan of this sahadı	(مار،	(b)	Description				
	OF			s/Donations Ma		uie)	()		outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE			fficeholder/Poli		:ee		느		officeholder livin	g expense	
								Membership (due	es		
							_					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offic	eholder name	Offi	ice souç	ght			Office h	eld	
		•										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/36 Rpt: 47/85	Waldrop, Teresa J. (The Honorable) 00086011
4	Date	5 Payee name
	05/21/2025	Office Max
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$87.39	1576 West Gray
		Houston , TX 77019
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Campaign supplies
		Campaign supplies
_	Operation ONLY if allowed	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	05/24/2025	Office Max
	Amount (\$)	Payee address; City; State; Zip Code
	\$11.37	1576 West Gray
		Houston , TX 77019
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Copy & print order - petitions
		Copy a plint order pouterie
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Data	David and the second se
	Date 02/19/2025	Payee name ROAD Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	P.O. Box 22678
		Houston, TX 77227
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Membership dues
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	
	•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 13/36 Rpt: 48/85	Waldrop, Teresa J. (The Honorable)	00086011
4 Date	5 Payee name	<u>'</u>
05/12/2025	Raise The Money, Inc.	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$1.47	P.O. Box 26466	
	Little Rock, AR 72221	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Charge on donation from Mary Ann Ryerson
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sou	ught Office held
experialitate to beliefit c/c	711	
Date	Payee name	
05/12/2025	Raise The Money, Inc.	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$12.50	P.O. Box 26466	
	Little Rock, AR 72221	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Charge on donation from Mary Ann Ryerson
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sou OH	ight Office held
Date	Payee name	
05/13/2025	Raise The Money, Inc.	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$24.75	P.O. Box 26466	
	Little Rock, AR 72221	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Charge on donation from Laura Dale
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sou	ight Office held
experientare to benefit 6/6	••	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 14/36 Rpt: 49/85	Waldrop, Teresa J. (The Honorable) 00086011
4	Date	5 Payee name
	05/13/2025	Raise The Money, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5.15	P.O. Box 26466
		Little Rock, AR 72221
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Charge on donation from Cruz Cervantes
		Charge on donation from Graz Gervantes
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
,	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	05/13/2025	Raise The Money, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.15	P.O. Box 26466
		Little Rock, AR 72221
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Charge on donation from Victoria Lightman
		Charge on donation from victoria Lightman
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	•
_	Date	
	Date	Payee name
	05/12/2025	Raise The Money, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.47	P.O. Box 26466
		Little Rock, AR 72221
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Charge on donation from Teresa Waldrop - \$25 donation test of processing system
	Computate ONLY if direct	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/36 Rpt: 50/85	Waldrop, Teresa J. (The Honorable) 00086011
4	Date	5 Payee name
	05/15/2025	Raise The Money, Inc.
6	Amount (\$) \$5.15	7 Payee address; City; State; Zip Code P.O. Box 26466
L		Little Rock, AR 72221
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Charge on donation from Ellen Sloane
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/15/2025	Raise The Money, Inc.
	Amount (\$) \$245.25	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) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Charge on donation from Amy Carlin
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/15/2025	Raise The Money, Inc.
	Amount (\$) \$24.75	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) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Charge on donation from Christine Thrash
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 16/36 Rpt: 51/85	2 FILER NAME Waldrop, Teresa J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086011
4	Date 05/19/2025	5 Payee name Raise The Money, Inc.	
6	Amount (\$) \$122.75	7 Payee address; City; State; Zip Code P.O. Box 26466	
8	PURPOSE OF EXPENDITURE	Check if A	n ravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense n donation from Charlotte Asmus
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 05/19/2025	Payee name Raise The Money, Inc.	
	Amount (\$) \$24.75	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) Accounting/Banking (b) Description Check if the Check if A	n ravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense n donation from Wendy Burgower
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 05/20/2025	Payee name Raise The Money, Inc.	
	Amount (\$) \$24.75	Payee address; City; State; Zip Code P.O. Box 26466	
		Little Rock, AR 72221	
	PURPOSE OF EXPENDITURE	Check if A	n ravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense n donation from Barbara Runge
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		s)
	Sch: 17/36 Rpt: 52/85	Waldrop, Teresa J. (The Honorable) 00086011	
4	Date	5 Payee name	
	05/20/2025	Raise The Money, Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$24.75	P.O. Box 26466	
		Little Rock, AR 72221	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Charge on donation from Amy Perez	
		Sharge on donation nom / tiny i crez	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
H	Date	Payee name	
	05/20/2025	Raise The Money, Inc.	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$24.75	P.O. Box 26466	
	Ψ24.13	1.0. 80x 20400	
		Little Rock, AR 72221	
_	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Charge on donation from Angela Stout	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit eror		
	Date	Payee name	
L	05/20/2025	Raise The Money, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$37.00	P.O. Box 26466	
		Little Rock, AR 72221	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
	-	Check if Austin, TX, officeholder living expense Charge on donation from Thomas Singleton	
		Charge on donation from Thomas Singleton	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		iler ID (Ethics Commission Filers) 0086011
4	Sch: 18/36 Rpt: 53/85		000011
4	Date 05/20/2025	5 Payee name Raise The Money, Inc.	
6	Amount (\$) \$12.50		
		Little Rock, AR 72221	
8	PURPOSE OF EXPENDITURE	Check if Austin, TX, off	of Texas. Complete Schedule T. ficeholder living expense on from Diane St Yves Brewer
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought OH	Office held
	Date	Payee name	
	05/20/2025	Raise The Money, Inc.	
	Amount (\$) \$122.75	Payee address; City; State; Zip Code P.O. Box 26466	
		Little Rock, AR 72221	
	PURPOSE OF EXPENDITURE	Check if Austin, TX, off	of Texas. Complete Schedule T. ficeholder living expense on from Susan McLerran
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought OH	Office held
	Date 05/21/2025	Payee name Raise The Money, Inc.	
	Amount (\$) \$5.15	Payee address; City; State; Zip Code P.O. Box 26466	
		Little Rock, AR 72221	
	PURPOSE OF EXPENDITURE	Check if Austin, TX, off	of Texas. Complete Schedule T. ficeholder living expense on from Patricia Hibler
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought OH	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 19/36 Rpt: 54/85	Waldrop, Teresa J. (The Honorable) 00086011
4	Date	5 Payee name
	05/21/2025	Raise The Money, Inc.
6	Amount (\$) \$24.75	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) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Charge on donation from Susan Myres
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/22/2025	Raise The Money, Inc.
	Amount (\$) \$24.75	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) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Charge on donation from Tammy Moon
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/22/2025	Raise The Money, Inc.
	Amount (\$) \$24.75	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) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Charge on donation from Chung Lee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 20/36 Rpt: 55/85	Waldrop, Teresa J. (The Honorable) 00086011	
4	Date	5 Payee name	
	05/22/2025	Raise The Money, Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$5.15	P.O. Box 26466	
		Little Rock, AR 72221	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Charge on donation from R. Nicole Stagg	
		Charge on donation from it. Nicole Stagg	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
9	expenditure to benefit C/O		
\vdash	Data	David and the second se	
	Date	Payee name	
	05/22/2025	Raise The Money, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$12.50	P.O. Box 26466	
		Little Rock, AR 72221	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Charge on donation from Thao Tran	
		Charge on donation from that that	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
_	Data		
	Date	Payee name	
	05/22/2025	Raise The Money, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$49.25	P.O. Box 26466	
		Little Rock, AR 72221	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Charge on donation from O'Neil Wysocki	
		Charge on donation from O Neil Wysocki	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OH		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 21/36 Rpt: 56/85	Waldrop, Teresa J. (The Honorable) 00086011
4	Date	5 Payee name
L	05/22/2025	Raise The Money, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$750.00	P.O. Box 26466
		Little Rock, AR 72221
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Charge on donation from Trey Yates
		Charge on donation from they rates
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
F	Date	Payee name
	05/22/2025	Raise The Money, Inc.
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$12.50	P.O. Box 26466
		Little Rock, AR 72221
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Charge on donation from Melanie Bragg
		Charge on donation from Metanic Bragg
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	05/22/2025	Raise The Money, Inc.
H	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	P.O. Box 26466
	,	
		Little Rock, AR 72221
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Charge on departion from Tari Walter
		Charge on donation from Teri Walter
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how to co	omplete this fo	rm.		
1 Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
Sch: 22/36 Rpt: 57/85	Waldrop, Teresa J. (The Honorable)			00086011	
4 Date	5 Payee name		<u> </u>		
05/22/2025	Raise The Money, Inc.				
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode			
\$12.50	P.O. Box 26466				
	Little Rock, AR 72221				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Descript	tion		
OF EXPENDITURE	Accounting/Banking	Check	if travel outside		plete Schedule T.
EXI ENDITORE				officeholder living	
		Charge	on donau	ion irom w	lliam Connolly
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ught		Office he	old.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		ugni		Office file	eiu
	Т				
Date 05/33/3035	Payee name				
05/22/2025	Raise The Money, Inc.				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$24.75	P.O. Box 26466				
	Little Rock, AR 72221				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Descript			
EXPENDITURE	Accounting/Banking			e of Texas. Com officeholder living	plete Schedule T.
					eryl Alsandor
					•
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught		Office he	eld
expenditure to benefit C/O	Н				
Date	Payee name				
05/22/2025	Raise The Money, Inc.				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$15.53	P.O. Box 26466				
	Little Rock, AR 72221				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Descript	tion		
OF	Accounting/Banking			e of Texas. Com	plete Schedule T.
EXPENDITURE	, toodantang, bantang			officeholder living	
		Charge	on donati	ion from All	en Zwernemann
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ught		Office he	eld
experientitie to beliefft C/O					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 23/36 Rpt: 58/85	2 FILER NAME Waldrop, Teresa J. (The Honorable) 3 Filer ID (Ethics Commission File 00086011	ers)
4	Date 05/22/2025	5 Payee name Raise The Money, Inc.	
6	Amount (\$) \$49.25	7 Payee address; City; State; Zip Code P.O. Box 26466	
8	PURPOSE OF EXPENDITURE	Little Rock, AR 72221 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Charge on donation from Denise Khoury	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date 05/22/2025	Payee name Raise The Money, Inc.	
	Amount (\$) \$19.85	Payee address; City; State; Zip Code P.O. Box 26466	
	PURPOSE OF EXPENDITURE	Little Rock, AR 72221 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Charge on donation from Leneice Lewis	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H	
	Date 05/22/2025	Payee name Raise The Money, Inc.	
	Amount (\$) \$24.75	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) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Charge on donation from Alexander Hunt	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to cor	nplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 24/36 Rpt: 59/85	Waldrop, Teresa J. (The Honorable)	00086011
4 Date	5 Payee name	
05/23/2025	Raise The Money, Inc.	
6 Amount (\$)	7 Payee address; City; State; Zip Cod	de
\$24.75	P.O. Box 26466	
	Little Rock, AR 72221	
8 PURPOSE	·	(b) Description
OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	3	Check if Austin, TX, officeholder living expense
		Charge on donation from Lauren Waddell
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	aht Office held
expenditure to benefit C/O		The Telu
Date	Payee name	
05/23/2025	Raise The Money, Inc.	
Amount (\$)	Payee address; City; State; Zip Coo	de
\$14.95	P.O. Box 26466	
	Little Rock, AR 72221	
PURPOSE OF	((b) Description
EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Charge on donation from John Chapman
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office souç	ght Office held
Date	Paise The Manay Inc	
05/28/2025	Raise The Money, Inc.	4-
Amount (\$) \$24.75	Payee address; City; State; Zip Coo P.O. Box 26466	de
Ψ24.13	F.O. Box 20400	
	Little Rock, AR 72221	
PURPOSE		(b) Description
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
LXFLINDITORL		Charge on denotion from Shelly Marchant
		Charge on donation from Shelly Merchant
Complete ONLY if direct	Candidate/Officeholder name Office sout	yht Office held
expenditure to benefit C/O		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 25/36 Rpt: 60/85	Waldrop, Teresa J. (The Honorable) 00086011
4	Date	5 Payee name
	05/28/2025	Raise The Money, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$49.25	P.O. Box 26466
		Little Rock, AR 72221
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Charge on donation from Julie Brock
		Charge on donation nom daile Brock
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	
		Payee name
	05/29/2025	Raise The Money, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.50	P.O. Box 26466
		Little Rock, AR 72221
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Charge on donation from Alice O'Neill
		Charge on donation nom Alice of Neill
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Davisa nama
	06/04/2025	Payee name Raise The Money, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.50	P.O. Box 26466
		LWL B 1 AB 7004
		Little Rock, AR 72221
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Charge on donation from Stefani Shapiro
		2 1. 3 1 2 1. 3 1 2 1
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comp	olete this	s form.		
1	Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Sch: 26/36 Rpt: 61/85	Waldrop, Teresa J. (The Honorable)			00086011	
4	Date	5 Payee name		·		
	06/23/2025	Raise The Money, Inc.				
6	Amount (\$)	7 Payee address; City; State; Zip Code	9			
	\$73.75	P.O. Box 26466				
		Little Rock, AR 72221				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)) Desc			
	OF EXPENDITURE	Accounting/Banking		theck if travel outsid		
			_	theck if Austin, TX, our control of the control of		
			0	go o aoa.		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	nt		Office he	eld
	expenditure to benefit C/OI					
	Date	Payee name				
	06/23/2025	Raise The Money, Inc.				
	Amount (\$)	Payee address; City; State; Zip Code	,			
	\$98.25	P.O. Box 26466				
	400.20					
		Little Rock, AR 72221				
	PURPOSE) Desc	crintion		
	OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		cription heck if travel outsid	e of Texas. Com	plete Schedule T.
	EXPENDITURE	, 1000 carrianty, Darmany		theck if Austin, TX, o		
			Cha	rge on donati	ion from Da	n Cogdell
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	nt		Office he	eld
	Date	Payee name				
	06/24/2025	Raise The Money, Inc.				
	Amount (\$)	Payee address; City; State; Zip Code	9			
	\$73.75	P.O. Box 26466				
		Little Rock, AR 72221				
	PURPOSE OF	,) Desc			
	EXPENDITURE	Accounting/Banking		theck if travel outsid theck if Austin, TX, o		
						uren Waddell
				-		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	nt		Office he	eld
	expenditure to benefit C/OI	4				
_						

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica		mittee	Legal Services	s Expense	Salaries/W		e /Contract Labor		OTHER (enter	istrict a category not listed a	above)
	Credit Card Payment			The Instruction G	Guide explains h	ow to cor	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 27/36 Rpt: 62/85	١	Waldrop, Te	eresa J. (The F	Honorable)					00086011		
4	Date	5	Payee name					•	_			
	06/24/2025		Raise The N	loney, Inc.								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$73.75		P.O. Box 26	466								
			Little Rock,	AR 72221								
8	PURPOSE	(a)	Category (ca	e Categories listed at	the ten of this cohe	dula)	(b)	Description				
ľ	OF		Accounting/		the top of this sche	dule)	(~)		outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE							ш		officeholder livin		
								Charge on do	ona	tion from Ja	ason Gibson	
9	Complete ONLY if direct expenditure to benefit C/OH		andidate/Offi	ceholder name	O	ffice sou(ght			Office h	ield	
	experialitire to beliefit C/OI	' '										
	Date		Payee name									
	06/24/2025		Raise The N	loney, Inc.								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$73.75		P.O. Box 26	466								
			Little Rock,	AR 72221								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Accounting/					=			nplete Schedule T.	
								Charge on do		officeholder livin		
								Charge on uc	лιа	uon nom A	ille Kellileuy	
	Complete ONLY if direct		andidate/Offi	ceholder name	<u> </u>	ffice soug	aht			Office h	nold	
	expenditure to benefit C/O		andidate/Oni	scholder hame	0	mec sout	giit			Office in	iciu	
-	Data	Τ.	B									
	Date 06/24/2025	ı	Payee name Raise The N	Money Inc								
		┝			Ctata	Zin Co	al a					
	Amount (\$) \$1,500.00	l	Payee addres P.O. Box 26		State;	Zip Co	ae					
	\$1,500.00	'	F.O. BUX 20	400								
		Ι.	Little Deel	AD 70001								
		 	Little Rock,									
	PURPOSE OF		•	e Categories listed at	the top of this sche	dule)	(b)	Description	outci	do of Toyas Cor	nplete Schedule T.	
	EXPENDITURE	'	Accounting/	Banking				ш		officeholder livin	•	
								Charge on do				
	Complete ONLY if direct		andidate/Offi	ceholder name	0	ffice sou	ght			Office h	eld	
	expenditure to benefit C/O	Н										

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

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.			
1	Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Sch: 28/36 Rpt: 63/85	Waldrop, Teresa J. (The Honorable)		l	00086011	
4	Date	5 Payee name				
	06/25/2025	Raise The Money, Inc.				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$24.75	P.O. Box 26466				
		Little Rock, AR 72221				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description			
	OF	Accounting/Banking		outs	side of Texas. Com	plete Schedule T.
	EXPENDITURE		_		, officeholder living	
			Charge on d	ona	ation from Cr	aig Haston
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought			Office he	eld
_						
	Date	Payee name				
	06/25/2025	Raise The Money, Inc.				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$73.75	P.O. Box 26466				
		Little Rock, AR 72221				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description			
	OF EXPENDITURE	Accounting/Banking	—		side of Texas. Com	
	_,,, _,,,,,,				tion from Co	
			Charge on d	Ulic		autenite Hale
	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office he	<u></u>
	expenditure to benefit C/O				Office in	Siu
	Data					
	Date 06/25/2025	Payee name Raise The Money, Inc.				
		<u> </u>				
	Amount (\$)	Payee address; City; State; Zip Code P.O. Box 26466				
	\$147.25	P.O. BOX 20400				
		Little Rock, AR 72221				
	PURPOSE OF	,	Description			
	EXPENDITURE	Accounting/Banking			side of Texas. Com ., officeholder living	
			ш			hn Van Ness
			onal go on a	0		
	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office he	eld
	expenditure to benefit C/O	9			C00 III	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
_	Sch: 29/36 Rpt: 64/85	Waldrop, Teresa J. (The Honorable) 00086011
4	Date	5 Payee name
	06/25/2025	Raise The Money, Inc.
6	Amount (\$) \$73.75	7 Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Charge on donation from Taylor Imel
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/25/2025	Raise The Money, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.75	P.O. Box 26466
		Little Rock, AR 72221
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Charge on donation from Stephanie Crump
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/25/2025	Raise The Money, Inc.
	Amount (\$) \$49.25	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) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Charge on donation from Enrique Torres
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (I	Ethics Commission Filers)
Sch: 30/36 Rpt: 65/85	Waldrop, Teresa J. (The Honorable)		00086011	
4 Date	5 Payee name		•	
06/26/2025	Raise The Money, Inc.			
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode		
\$73.75	P.O. Box 26466			
	Little Rock, AR 72221			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	1	
OF EXPENDITURE	Accounting/Banking	Check if tr	avel outside of Texas. Complet	
LAI LIIDITORE		. —	ustin, TX, officeholder living ex	
		Charge of	n donation from Trey	raies
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ıaht .	Office held	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		igni	Office field	
Dete	Т -			
Date 06/27/2025	Payee name			
	Raise The Money, Inc.			
Amount (\$)	Payee address; City; State; Zip Co	oae		
\$73.75	P.O. Box 26466			
	1701 P. J. AD 70004			
	Little Rock, AR 72221			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		- Cabadula T
EXPENDITURE	Accounting/Banking	. —	avel outside of Texas. Complet ustin, TX, officeholder living ex	
			n donation from Bo N	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ıght	Office held	
expenditure to benefit C/O	H			
Date	Payee name			
06/26/2025	Raise The Money, Inc.			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$73.75	P.O. Box 26466			
	Little Rock, AR 72221			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	1	
OF	Accounting/Banking		avel outside of Texas. Complet	e Schedule T.
EXPENDITURE			ustin, TX, officeholder living ex	
		Charge or	n donation from Allys	on Brupbacher
Operation Objects in	Operations (Office In 11)	la 4	Off	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ıgnt	Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 31/36 Rpt: 66/85	Waldrop, Teresa J. (The Honorable) 00086011
4	Date	5 Payee name
	05/23/2025	Robinette, James
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$200.00	50 Spring Lane
		Manvel, TX 77578
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Photography for Campaign Kickoff Fundraiser
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
Г	Date	Payee name
	06/09/2025	Robinette, James
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	50 Spring Lane
		Manvel, TX 77578
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Video from Campaign Kickoff fundraiser
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
Г	Date	Payee name
	02/10/2025	Rubberstamps.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$26.23	12855 West Lisbon Road
		Brookfield, WI 53005
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Self-inking endorsement stamp
一	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
<u> </u>		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 32/36 Rpt: 67/85	Waldrop, Teresa J. (The Honorable) 00086011
4	Date	5 Payee name
	01/28/2025	Southwest Democrats
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.00	PO Box 2053
		Bellaire, TX 77402
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Monthly sustaining membership dues
L		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	03/03/2025	Southwest Democrats
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	PO Box 2053
		Bellaire, TX 77402
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Monthly sustaining membership
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	
\vdash	D :	
	Date	Payee name
	03/28/2025	Southwest Democrats
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	PO Box 2053
		Bellaire, TX 77402
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Monthly sustaining membership
	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica			Git/Awards/Memorial Legal Services	s Expense	Salaries/W		se s/Contract Labor		OTHER (enter	a category not listed al	oove)
	Credit Card Payment			The Instruction G	uide explains h	ow to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commiss	sion Filers)
	Sch: 33/36 Rpt: 68/85		Waldrop, Te	resa J. (The F	lonorable)					00086011		
4	Date	5	Payee name					•				
	04/28/2025		Southwest D	Democrats								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$10.00		PO Box 205	3								
			Bellaire, TX	77402								
8	PURPOSE	(a)	Category (sc	e Categories listed at	the ten of this scho	dulo)	(b)	Description				
	OF EXPENDITURE			s/Donations M		uule)	` '		outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITURE			Officeholder/Po		ttee		_		officeholder livir		
								Sustaining m	em	bership du	es	
_												
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Office	ceholder name	0	ffice sou	ght			Office h	neld	
		_										
	Date		Payee name									
	05/29/2025		Southwest D	Democrats								
	Amount (\$)	ı	Payee addres		State;	Zip Co	de					
	\$10.00		PO Box 205	3								
			Bellaire, TX	77402								
	PURPOSE OF			e Categories listed at		dule)	(b)	Description				
	EXPENDITURE	Contributions/Donations Made By						=		de of Texas. Cor officeholder livir	mplete Schedule T.	
			Cariuluale/C	/inceriolaei/Fo	illicai Comini	liee		Monthly susta				
								•				
	Complete ONLY if direct		 Candidate/Offic	ceholder name	0	ffice sou	ght			Office h	neld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	06/30/2025		Southwest D	Democrats								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$10.00		PO Box 205	3								
			Bellaire, TX	77402								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Contribution	s/Donations M	ade By			Check if travel			mplete Schedule T.	
	EXPENDITORE		Candidate/C	Officeholder/Po	litical Commi	ttee		_		officeholder livir		
								Sustaining m	em	persnip au	es'	
	Complete ONLY if divert	Ļ	Condidate /Off	oholder name		ffice carr	ab+			Office	oold	
	Complete ONLY if direct expenditure to benefit C/OI		Jai iuiuale/U∏i(ceholder name	O	ffice sou	ynı			Office h	leid	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 34/36 Rpt: 69/85	Waldrop, Teresa J. (The Honorable) 00086011
4	Date	5 Payee name
	02/18/2025	Spring Branch Democrats
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.00	P.O. Box 550161
	!	
		Houston, TX 77255-0161
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	!	Membership dues
	!	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	⊣
	Date	Payee name
	01/06/2025	Squarespace, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$204.67	225 Varick Street, 12th Floor
	!	
		New York, NY 10014
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	!	Website renewal fee
	!	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	н -
_	Date	Payee name
	06/06/2025	Texas Center for the Judicary
H	Amount (\$)	Payee address; City; State; Zip Code
	\$85.00	1210 San Antonio
	-	Ste 800
	!	Austin, TX 78701
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
	1	Ticket to TCJ Annual Judicial Education Conference
		luncheon
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experiulture to beliefit G/Oi	<u> </u>

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 35/36 Rpt: 70/85	Waldrop, Teresa J. (The Honorable) 00086011
4	Date	5 Payee name
	05/22/2025	Texas Gulf Coast Area Labor Federation
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$225.00	2506 Sutherland St
		Houston, TX 77023
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Celebration
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	04/11/2025	Texas Latinx Judges
		9
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	P. O. Box 90683
		San Antonio, TX 78209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Membership dues
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Davies same
	02/26/2025	Payee name Texas Women Lawyers
		,
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	www.texaswomenlawyers.net
		TX
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Texas Women Lawyers Annual Mtg & CLE on 4-11-
		2025
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Legal Service				Vages	e /Contract Labor ete this form.		Travel Out of D OTHER (enter	istrict a category not liste	ed above)
_	Total pages Schedule F1:	2							1	3	Filer ID	(Ethics Com	nission Filers)
1	Sch: 36/36 Rpt: 71/85	l	Waldrop, Te		(The Hon	orable)				3	00086011	(Ethics Conn	nission Filers)
4	Date	5	Payee name										
	06/16/2025		Waldrop, Te										
6	Amount (\$) \$1,133.10	ı	Payee addres P.O. Box 22		y;	State	e; Zip Co	ode					
			Houston , T	X 77001									
8	PURPOSE	(a)	Category (Se	e Categories	listed at the t	top of this so	hedule)	(b)	Description				
	OF EXPENDITURE		Loan Repay	ment/Re	imburser	nent			ш			nplete Schedule T	
									\Box		officeholder livin		_
									Reimburseme				
									\$1,133.10 on	4-1	14-2025 for	Campaign I	KICKOTT
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder n	iame		Office sou	ight			Office h	eld	
	Date		Payee name										
	04/08/2025	ı	Whole Food	S									
	Amount (\$)		Payee addres	s; Cit	v:	State	e; Zip Co	ode					
	\$26.99	l	955 Kirby Dı		,		, ,						
	Ψ20.99	·	933 Kilby Di	,									
		_	Houston, TX										
	PURPOSE	(a)	Category (Se	e Categories	listed at the t	top of this so	hedule)	(b)	Description				
	OF EXPENDITURE		Food/Bevera	age Expe	ense				<u></u>			nplete Schedule T	
	2/11/21/01/12								—		officeholder livin		
									Cake for 312t	th A	AJ Evans's	birthday cele	ebration
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder n	ame		Office sou	ight			Office h	eld	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

		The Insti	ruction Guide explains how	to complete	this form.							
1	Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission File								
	Sch: 1/8 Rpt: 72/85	Waldrop, Teresa J.	(The Honorable)			00086011						
4	CREDIT CARD ISSUER		ncial institution n Express	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$						
6	PAYMENT	(a) Amount Charged \$360.53	(b) Date of Charge 01/05/2025	(c) Date(s) 02/08/20	Credit Card Issue 25	r Paid						
7	PAYEE	(a) Payee name Phoenicia		(b) Payee 1001 Aus		City,	State,	Zip Code				
8	PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top Food/Beverage Exper	•	(b) Descrip			Court Jud	ges Board,				
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	, officeholder living ex	pense					
9 e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held						
	PAYMENT	(a) Amount Charged \$18.89	(b) Date of Charge 04/25/2025	(c) Date(s) 06/06/20	Credit Card Issue 25	r Paid						
	PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1725 3rd Street San Francisco, CA 94158								
	PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Description Transportation from The Council on Recovery luncheon								
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	, officeholder living ex	pense					
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held						
	PAYMENT	(a) Amount Charged \$3,399.31	(b) Date of Charge 05/16/2025	(c) Date(s)	Credit Card Issue	r Paid						
	PAYEE	(a) Payee name Maven		(b) Payee 1501 Silv Houston,		City,	State,	Zip Code				
	PURPOSE OF EXPENDITURE Political Non-Political	OITURE (See Categories listed at the top of this schedule) Food/Beverage Expense				(b) Description Remainder of deposit for Campaign Kickoff Fundraiser						
_	ш	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Cneck if Austin, TX,	officeholder living expense Office held						
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Onicendidei	name Office	Sougiii		Office Held						
•												

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)			
	Sch: 2/8 Rpt: 73/85	Waldrop, Teresa J.	(The Honorable)			00086011					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$					
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issuer	Paid					
		\$1,052.65	06/21/2025								
7	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code			
		Hotel Rumbao		100 C. Bru	-						
L					00901 Puerto R	ico					
8	PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Lodging while attending National Judicial College's 2025 Court Administration Academy for Judges							
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	·	Check if Austin, TX,	officeholder living exp	ense				
9	· —					Office held					
е	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid					
		\$360.00	02/18/2025	02/08/202	5 03/06/2025						
	PAYEE	(a) Payee name	•	(b) Payee a	ddress;	City,	State,	Zip Code			
		United States Posta	al Service	1500 Hadl	ey						
				Houston,							
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	,	(b) Description PO Box annual renewal							
	Political	Office Overhead/Rent	tal Expense								
	X Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held					
е	xpenditure to benefit C/OH			_							
	PAYMENT	(a) Amount Charged \$7.95	(b) Date of Charge 02/27/2025		Credit Card Issuer 5 04/06/2025	Paid					
Г	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code			
		Libor		1725 3rd 9	Street						
		Uber									
L					isco, CA 94158						
	PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)				ion	24-4- Oital i	A	F			
	Transportation Equipment And Related Expense				Uber transportation from State Capitol in Austin, Texas						
	X Non-Political	─	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
H	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held					
е	xpenditure to benefit C/OH										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.											
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethic	s Commiss	sion Filers)			
	Sch: 3/8 Rpt: 74/85	Waldrop, Teresa J.	(The Honorable)				00086011					
4	CREDIT CARD ISSUER		ncial institution revious	E C	XPEND	F UNITEMIZED ITURES D TO A CREDIT	\$					
6	PAYMENT	(a) Amount Charged	(b) Date of Charge			Credit Card Issuer	Paid					
		\$1,133.10	04/14/2025	06/	06/202	5						
7	PAYEE	(a) Payee name	•	(b) F	Payee a	ddress;	City,	State,	Zip Code			
		Maven		150	1 Silve	r St						
				Ηοι	uston, 1	TX 77007						
8	PURPOSE OF	(a) Category		1 ' '	Descripti							
	EXPENDITURE Political	(See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	Dep	oosit fo	r Campaign Kicl	koff Fundraiser					
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	ense				
9	Complete ONLY if direct	Candidate/Officeholder	name Offic	ce soug	ht		Office held					
е	xpenditure to benefit C/OH											
	PAYMENT	(a) Amount Charged	(b) Date of Charge			Credit Card Issuer	Paid					
		\$20.98	05/04/2025	06/	06/202	5						
	PAYEE	(a) Payee name		(b) F	Payee a	ddress;	City,	State,	Zip Code			
		Uber		172	25 3rd S	Street						
				San	r Franc	isco, CA 94158						
	PURPOSE OF	(a) Category		, ,	Descripti							
	EXPENDITURE	(See Categories listed at the top Transportation Equipr		Transportation to HBAD Gala								
	Political	Expense										
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense								
	Complete ONLY if direct	Candidate/Officeholder	name Offic	ce soug	jht		Office held					
е	xpenditure to benefit C/OH											
	PAYMENT	(a) Amount Charged	(b) Date of Charge			Credit Card Issuer	Paid					
		\$200.00	05/02/2025	06/	06/202	5						
H	PAYEE	(a) Payee name		(b) F	Payee a	ddress;	City,	State,	Zip Code			
				505	E. Hui	ntland Drive						
		Texas Board of Leg	jal	Suit	te 400,	LB 28						
				Aus	stin , TX	(78752						
	PURPOSE OF	(a) Category		(b) E	Descripti	on						
	EXPENDITURE	(See Categories listed at the top Office Overhead/Rent	,	Ann	nual rer	newal fee						
	Political	2.1100 0 10111000/110111										
L	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	e T. Check if Austin, TX, officeholder living expense								
	Complete ONLY if direct	Candidate/Officeholder	name Offic	ce soug	ht		Office held					
е	xpenditure to benefit C/OH											

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(9)	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
	Sch: 4/8 Rpt: 75/85	Waldrop, Teresa J.	(The Honorable)			00086011		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$30.00	(b) Date of Charge 05/06/2025	(c) Date(s) 06/06/20) Credit Card Issuei 25	r Paid		
7	PAYEE	(a) Payee name Canva			address; ax Street Is New South Wa	City, ales 2010 Austi	State,	Zip Code
8	PURPOSE OF	(a) Category		(b) Descrip				
	EXPENDITURE Political	(See Categories listed at the top Office Overhead/Reni		Design s	oftware			
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
е	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$25.00	(b) Date of Charge 05/12/2025	(c) Date(s)) Credit Card Issuei	r Paid		
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Raise The Money,	Inc.	P.O. Box	26466 ck, AR 72221			
H	PURPOSE OF	(a) Category		(b) Descrip				
	EXPENDITURE Political	(See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	1 ' '	ne online fundrais	sing platform fo	r reelect	ion
	X Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	—	Office held		
	PAYMENT	(a) Amount Charged \$30.00	(b) Date of Charge 06/06/2025	(c) Date(s)) Credit Card Issuei	r Paid		
	PAYEE	(a) Payee name Canva			address; ax Street Is New South Wa	City, ales 2010 Austi	State, ralia	Zip Code
	PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Descrip Design s	otion oftware subscript	tion		
L	X Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
l _								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	nics Commiss	sion Filers)			
	Sch: 5/8 Rpt: 76/85	Waldrop, Teresa J.	(The Honorable)			00086011					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$					
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid					
		\$22.04	06/20/2025								
7	PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code			
		Uber		1725 3rd							
					cisco, CA 94158	3					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip							
	Political	Transportation Equipr Expense		Transpor	tation from notei	el to airport after conference					
	X Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	, officeholder living ex	kpense				
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held					
е	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid					
		\$27.98	06/16/2025								
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code			
		Uber		1725 3rd	Street						
				San Fran	cisco, CA 94158	3					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	·	(b) Descrip	tion tation from airpo	rt to hotel for o	conference)			
	Political	Transportation Equipr Expense	ment And Related								
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense							
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged	(b) Date of Charge	` ' ' '	Credit Card Issue	r Paid					
		\$109.17	01/08/2025	02/08/20	25						
Г	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code			
				1701 We	st Alabama						
		H-E-B									
					, TX 77098						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this echodula)	(b) Descrip			_				
		Food/Beverage Expe	,		ter, utensils/plate			District			
	Political		Judges Bd, AJs & Ct Coordinators mtgs								
L	X Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	, officeholder living ex	kpense				
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held					
L e	xpenditure to benefit C/OH										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	s Commiss	sion Filers)			
	Sch: 6/8 Rpt: 77/85	Waldrop, Teresa J.	(The Honorable)			00086011					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$					
6	PAYMENT	(a) Amount Charged \$76.62	(b) Date of Charge 04/12/2025	(c) Date(s) (06/06/202	Credit Card Issuer 5	Paid					
7	PAYEE	(a) Payee name Office Depot		(b) Payee a 3443 Kirby	/	City,	State,	Zip Code			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rent	•	(b) Descript Campaign	ion						
	X Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder		e sought		Office held					
	PAYMENT	(a) Amount Charged \$201.06	(b) Date of Charge 01/10/2025	(c) Date(s) (02/08/202	Credit Card Issuer 5	Paid					
	PAYEE	AYEE (a) Payee name TADJ				City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde	ns Made By	Houston, 7 (b) Descript Contribution							
L	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
6	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged \$22.04	(b) Date of Charge 06/20/2025	(c) Date(s) (Credit Card Issuer	⁻ Paid					
	PAYEE	(a) Payee name Uber		(b) Payee at 1725 3rd S		City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top Transportation Equipn Expense	ment And Related	(b) Descript Uber from	ion hotel to airport	after judicial co	onference)			
L	X Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
1											

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commiss	sion Filers)			
	Sch: 7/8 Rpt: 78/85	Waldrop, Teresa J.	(The Honorable)			00086011					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$					
6	PAYMENT	(a) Amount Charged \$73.00	(b) Date of Charge 02/01/2025	(c) Date(s) 03/06/20	Credit Card Issuer 25	r Paid					
7	PAYEE	(a) Payee name Frank's Pizza		(b) Payee a 417 Travi		City,	State,	Zip Code			
8	PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top Food/Beverage Expe	nse	(b) Descrip Lunch for	otion 312th staff						
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
	Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held					
e	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged \$7.97	(b) Date of Charge 02/27/2025	(c) Date(s) 04/06/20	Credit Card Issuer 25	r Paid					
	PAYEE	(a) Payee name Uber		(b) Payee a	Street	City,	State,	Zip Code			
⊢	PURPOSE OF	(a) Category		San Francisco, CA 94158 (b) Description							
	EXPENDITURE Political	(See Categories listed at the top Transportation Equipi Expense		Uber to C							
	X Non-Political		of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living exp	ense				
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held					
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	r Paid					
		\$30.00	06/06/2025								
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code			
		Canva		110 Kippa	ax Street						
					s New South Wa	ales 2010 Aust	ralia				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip							
	Political	Office Overhead/Ren	,	Design so	oftware						
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
	Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held					
e	xpenditure to benefit C/OH										
		•									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By	- Gift/Awards	/Memorials Expense P	rinting Expense Tra	avel in District avel Out of District
	Candidate/Officeholder/Politica	-	ces S ruction Guide explains ho	·	FHER (enter a category not listed above)
1	Total pages Schedule F4:		•		3 Filer ID (Ethics Commission Filers)
	Sch: 8/8 Rpt: 79/85	Waldrop, Teresa J.	(The Honorable)		00086011
4	CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED	
	ISSUER	see pr	revious	EXPENDITURES CHARGED TO A CREDIT	\$
				CARD	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	Paid
		\$27.98	06/16/2025		
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
		Uber		1725 3rd Street	
				Con Francisco CA 04150	
8	PURPOSE OF	(a) Category		San Francisco, CA 94158 (b) Description	
ľ	EXPENDITURE	(See Categories listed at the top	,		to attend judicial conference
	Political	Transportation Equipr Expense	nent And Related	3 3 5 5 5 5 5 5	
	X Non-Political	_	of Texas. Complete Schedule T.	Check if Austin TY	officeholder living expense
9	Complete ONLY if direct	Candidate/Officeholder		ce sought	Office held
	penditure to benefit C/OH			•	

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nittee L	Gift/Awards/Memorials I Legal Services The Instruction Gu	·		Wages/Contract Labor		Travel Out of Distric OTHER (enter a cat	et tegory not listed above)	
1	Total pages Schedule G:	2 F	ILER NAME					3 F	Filer ID (Ethi	cs Commission Fil	lers)
	Sch: 1/5 Rpt: 80/85	\ v	Valdrop, Te	resa J. (The Ho	onorable)				00086011		ŕ
4	Date	5 P	ayee name								
	02/08/2025	A	merican Ex	press							
6	Amount (\$)	7 P	ayee addres	s; City;	State;	Zip Co	ode				
	\$360.53	P	O. Box 650	0448							
	Reimbursement from political contributions intended	D	Dallas, TX 7	5265-0448							
8	PURPOSE	(a) C	Category (See	e Categories listed at th	e top of this sch	edule)	(b) Description	Che	eck if travel outside of	of Texas. Complete Sch	edule T.
	OF EXPENDITURE	F	ood/Bevera	ige Expense			[Che	ck if Austin, TX, offi	iceholder living expense	
	_,,, _,,,,,,						HarCo Fam Law	v Jud	ges, AJs & Co	ourt Coordinator	s lunch
Ļ	Complete ONLY if direct	Candi	idata/Officab	alder name			Office cought		Offic	aa hald	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cand	idate/Onicen	older name			Office sought		Oilid	ce held	
	Date	Р	ayee name								
	02/08/2025	1	xmerican Ex	press							
	Amount (\$)	Р	ayee addres	s; City;	State;	Zip Co	ode				
	\$109.17	P	P.O. Box 650	0448							
	Reimbursement from political contributions intended		Dallas, TX 7	5265-0448							
	PURPOSE	С	Category (See	Categories listed at th	e top of this sch	edule)	Description	Che	ck if travel outside o	of Texas. Complete Sch	edule T.
	OF EXPENDITURE	F	ood/Bevera	ige Expense				Che	ck if Austin, TX, offi	iceholder living expense	
	EXI ENDITORE						HarCo Fam Law	v Jud	ges, AJs & Co	ourt Coordinator	s lunch
	Complete ONLY if direct expenditure to benefit C/OH	Candi	idate/Officeho	older name			Office sought		Offic	ce held	
	Date	Гр	ayee name								
	02/08/2025	1	American Ex	nress							
		-									
	Amount (\$)	1	ayee addres		State;	Zip Co	oue				
	\$201.06	1	P.O. Box 650	J448							
	Reimbursement from political contributions intended	D	Dallas, TX 7	5265-0448							
	PURPOSE	С	Category (See	Categories listed at th	e top of this sch	edule)	Description	Che	ck if travel outside	of Texas. Complete Sch	edule T.
	OF EXPENDITURE	c	Contributions	s/Donations Ma	de By			Che	eck if Austin, TX, offi	iceholder living expense	
	EXI ENDITORE	C	Candidate/O	fficeholder/Polit	ical Comm	ittee	Contribution to 1	TADJ			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candi	idate/Officeho	older name			Office sought		Offic	ce held	

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E			Travel in D	District t of District enter a category not listed above)
	Credit Card F dyment		The Instruction Guide explains	how to co	omplete this form.			
1	Total pages Schedule G:	2 FILER NAM	E			3	Filer ID	(Ethics Commission Filers)
	Sch: 2/5 Rpt: 81/85	Waldrop, T	eresa J. (The Honorable)				000860)11
4	Date	5 Payee name	<u> </u>					
	03/06/2025	American E						
6	Amount (\$)	7 Payee addre	ess; City; State	; Zip Co	ode			
	\$73.00	P.O. Box 6	50448					
	Reimbursement from							
	X political contributions intended	Dallas, TX	75265-0448					
8	PURPOSE	(a) Category (s	See Categories listed at the top of this sch	nedule)	(b) Description	Ch	eck if trave	el outside of Texas. Complete Schedule T.
	OF	Food/Beve	rage Expense			Ch	eck if Austi	in, TX, officeholder living expense
	EXPENDITURE				Frank's Pizza - L	.unc	h for 31	L2th staff
9	Complete ONLY if direct	Candidate/Office	holder name		Office sought			Office held
	expenditure to benefit C/OH							
	Date	Payee name)					
	04/06/2025	American E						
	Amount (\$)	Payee addre	ess; City; State	; Zip Co	ode			
	\$360.00	P.O. Box 6	50448					
	Reimbursement from							
	X political contributions intended	Dallas, TX	75265-0448					
	PURPOSE	Category (s	See Categories listed at the top of this sch	nedule)	Description	Ch	eck if trave	el outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Office Ove	rhead/Rental Expense		[Ch	eck if Austi	in, TX, officeholder living expense
	EXPENDITORE				USPS PO Box re	enta	l renew	al
	Complete ONLY if direct	Candidate/Office	holder name		Office sought			Office held
	expenditure to benefit							
	C/OH							
	Date	Payee name)					
	04/06/2025	American E	Express					
	Amount (\$)	Payee addre	ess; City; State	; Zip Co	ode			
	\$7.97	P.O. Box 6	50448	•				
	Reimbursement from							
	X political contributions intended	Dallas, TX	75265-0448					
Н	PURPOSE	Category (s	See Categories listed at the top of this sch	nedule)	Description	Ch	eck if trave	el outside of Texas. Complete Schedule T.
	OF	Transporta	tion Equipment And Related	d		Ch	eck if Austi	in, TX, officeholder living expense
	EXPENDITURE	Expense			Uber to Capitol			
	Complete ONLY if direct	L Candidate/Office	holder name		Office sought			Office held
	expenditure to benefit	2			5 55 ag. it			
L	C/OH							

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains		Expense Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2 FILER NAM	<u>·</u>			3 Filer ID (Ethics Commission Filers)
-	Sch: 3/5 Rpt: 82/85	1	Teresa J. (The Honorable)			00086011
4	Date	5 Payee name	е			•
	04/06/2025	American I	Express			
6	Amount (\$)	7 Payee addr	ess; City; State	e; Zip C	ode	
	\$7.95	P.O. Box 6	50448			
	X Reimbursement from political contributions intended	Dallas, TX	75265-0448			
8	PURPOSE	(a) Category (See Categories listed at the top of this so	chedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Transporta Expense	ation Equipment And Relate	ed	Uber from Capito	Check if Austin, TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	I Candidate/Office	eholder name		Office sought	Office held
	Date	Payee name	e			
	06/06/2025	American I	Express			
	Amount (\$)	Payee addr	ess; City; State	e; Zip C	ode	
	\$76.62	P.O. Box 6	550448			
	Reimbursement from political contributions intended	Dallas, TX	75265-0448			
	PURPOSE	Category (See Categories listed at the top of this so	hedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Office Ove	rhead/Rental Expense			Check if Austin, TX, officeholder living expense
					Office Depot cha	arge on 4-12-2025
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	eholder name		Office sought	Office held
	Date	Payee name	e			
	06/06/2025	American I	Express			
	Amount (\$)	Payee addr	ess; City; State	e; Zip C	ode	
	\$1,133.10	P.O. Box 6	550448			
	X Reimbursement from political contributions intended	Dallas, TX	75265-0448			
	PURPOSE	Category (See Categories listed at the top of this so	hedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Food/Beve	erage Expense			Check if Austin, TX, officeholder living expense
					Deposit for Camp Sawyer Yard	paign Kickoff fundraiser at Maven
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	eholder name		Office sought	Office held

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	verhead/Rental Expense Expense Expense Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Credit Card F dyment	The Instruction Guide explains how to o	complete this form.	
1	Total pages Schedule G:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 4/5 Rpt: 83/85	Waldrop, Teresa J. (The Honorable)		00086011
4	Date	5 Payee name	l	
•	06/06/2025	American Express		
_			· ada	
6	Amount (\$) \$18.89	7 Payee address; City; State; Zip C	oue	
	\$18.89	P.O. Box 650448		
	X Reimbursement from political contributions			
	intended	Dallas, TX 75265-0448		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Transportation Equipment And Related		Check if Austin, TX, officeholder living expense
		Expense	_	-25-2025 - Council on Recovery
			luncheon	
9		Candidate/Officeholder name	Office sought	Office held
	expenditure to benefit C/OH			
	0,011			
	Date	Payee name		
	06/06/2025	American Express		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$200.00	P.O. Box 650448		
	Reimbursement from			
	x political contributions intended	Dallas, TX 75265-0448		
_	PURPOSE	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF	Contributions/Donations Made By	Description	Check if Austin, TX, officeholder living expense
	EXPENDITURE	Candidate/Officeholder/Political Committee	TBLS renewal du	es .
_	Complete ONLY if direct	Landidate/Officeholder name	Office sought	Office held
	expenditure to benefit	Canada a Canada	Omeo sought	Since Hold
	C/OH			
	Date	Payee name		
	06/06/2025	American Express		
	Amount (\$)	Payee address; City; State; Zip C	code	
	\$20.98	P.O. Box 650448	•	
	Reimbursement from			
	x political contributions intended	Dallas, TX 75265-0448		
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Transportation Equipment And Related		Check if Austin, TX, officeholder living expense
	EXPENDITORE	Expense	Uber charge on 5	-4-2025 - HBAD Gala
		Candidate/Officeholder name	Office sought	Office held
	expenditure to benefit			
	C/OH			

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 5/5 Rpt: 84/85 Waldrop, Teresa J. (The Honorable) 00086011 Date Payee name **American Express** 06/06/2025 6 Amount (\$) Payee address; City; State; Zip Code \$30.00 P.O. Box 650448 Reimbursement from political contributions intended Х Dallas, TX 75265-0448 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense **EXPENDITURE** Canva monthly subscription charge on 5-6-2025 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

OUTSTANDING LOANS SCHEDULE L 1 Total pages Schedule L: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 85/85 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Waldrop, Teresa J. (The Honorable) 00086011 4 Name of lender LENDER INFORMATION Waldrop, Teresa **5** Lender address; City; State; Zip Code Houston, TX 77001 **GUARANTOR** 6 Name of guarantor **INFORMATION** X not applicable 7 Guarantor address; City; State; Zip Code LENDER Name of lender INFORMATION Waldrop, Teresa Lender address; City; State; Zip Code Houston, TX 77001 **GUARANTOR** Name of guarantor INFORMATION X not applicable Guarantor address; City; State; Zip Code LENDER Name of lender INFORMATION Waldrop, Teresa Lender address; City; State; Zip Code Houston, TX 77001 **GUARANTOR** Name of guarantor INFORMATION X not applicable Guarantor address; City; State; Zip Code