

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

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|--|--|--|---|--|
| The GPAC Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00055728 | 2 Total pages filed: 48 | |
| 3 COMMITTEE NAME Harris County Democratic Lawyers' Association Inc. | | | OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/14/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged | |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3333 Lake St Unit 7F Houston, TX 77098 | | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST MI Michele NICKNAME LAST SUFFIX Mullin | | | |
| 6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE PO Box 8189 Houston, TX 77288 | | | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 8189 Houston, TX 77288 | | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (713) 257-9330 | | | |
| 9 REPORT TYPE | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff | | | |
| 10 PERIOD COVERED | Month Day Year 01/01/2025 THROUGH Month Day Year 06/30/2025 | | | |
| 11 ELECTION | ELECTION DATE Month Day Year | | ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special | |

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

| | |
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| 12 COMMITTEE NAME Harris County Democratic Lawyers' Association Inc. | 13 Filer ID (Ethics Commission Filers) 00055728 |
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|---|--|--------------|
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported |
| | | B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | | |

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| 15 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 6,655.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 8,414.69 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 1,261.26 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |

16 AFFIDAVIT

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

Michele Mullin

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 48

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|--|---|---|
| 17 COMMITTEE NAME Harris County Democratic Lawyers' Association Inc. | | 18 Filer ID (Ethics Commission Filers) 00055728 |
| 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 6,655.00 |
| 2. | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 5. | <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 6. | <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 7. | <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 8. | <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 9. | <input type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 10. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 8,414.69 |
| 11. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 12. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 13. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 14. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 15. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/29 Rpt: 4/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 01/22/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams-Hurta, Michael 6 Contributor address; City; State; Zip Code Houston, TX 77056 | 7 Amount of Contribution (\$) \$35.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 01/07/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arney, Lance Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arney, Lance Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Miryea Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 04/08/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Miryea Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/29 Rpt: 5/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 02/11/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Nancy 6 Contributor address; City; State; Zip Code Houston, TX 77002 | 7 Amount of Contribution (\$) \$35.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) |
| Date 03/04/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Nancy Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 04/08/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Nancy Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnstone, George Contributor address; City; State; Zip Code Houston, TX 77004 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/07/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnstone, George Contributor address; City; State; Zip Code Houston, TX 77004 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/29 Rpt: 6/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 02/19/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnstone, George 6 Contributor address; City; State; Zip Code Houston, TX 77004 | 7 Amount of Contribution (\$) \$35.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 03/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnstone, George Contributor address; City; State; Zip Code Houston, TX 77004 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 04/08/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnstone, George Contributor address; City; State; Zip Code Houston, TX 77004 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bartos, John Contributor address; City; State; Zip Code Houston, TX 77018 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bartos, John Contributor address; City; State; Zip Code Houston, TX 77018 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/29 Rpt: 7/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 04/15/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bartos, John 6 Contributor address; City; State; Zip Code Houston, TX 77018 | 7 Amount of Contribution (\$) \$35.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 01/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bauer, Joshua Contributor address; City; State; Zip Code Houston, TX 77057 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Bob Contributor address; City; State; Zip Code Houston, TX 77030 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 03/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Bob Contributor address; City; State; Zip Code Houston, TX 77030 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braun, Steve Contributor address; City; State; Zip Code Houston, TX 77008 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/29 Rpt: 8/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 01/14/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calabrese, Tracy 6 Contributor address; City; State; Zip Code Houston, TX 77001 | 7 Amount of Contribution (\$) \$35.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calabrese, Tracy Contributor address; City; State; Zip Code Houston, TX 77001 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 04/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capo, Zeph Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Teacher | | Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardenas, Beto Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 04/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardenas, Beto Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/29 Rpt: 9/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 04/15/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cargas, James 6 Contributor address; City; State; Zip Code Houston, TX 77006 | 7 Amount of Contribution (\$) \$40.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 01/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Sherry Contributor address; City; State; Zip Code Houston, TX 77027 | Amount of Contribution (\$) \$70.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 05/05/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaperon, J. Alex Contributor address; City; State; Zip Code Houston, TX 77401 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Michael Contributor address; City; State; Zip Code Houston, TX 77019 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colon, Edgardo Contributor address; City; State; Zip Code Houston, TX 77007 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/29 Rpt: 10/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 01/07/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Jason 6 Contributor address; City; State; Zip Code Houston, TX 77002 | 7 Amount of Contribution (\$) \$75.00 |
| 8 Principal occupation / Job title (See Instructions) Judge | | 9 Employer (See Instructions) |
| Date 01/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cryer, Linda Contributor address; City; State; Zip Code Houston, TX 77098 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cryer, Linda Contributor address; City; State; Zip Code Houston, TX 77098 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 03/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cryer, Linda Contributor address; City; State; Zip Code Houston, TX 77098 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 04/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cryer, Linda Contributor address; City; State; Zip Code Houston, TX 77098 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/29 Rpt: 11/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 03/11/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dougherty, James 6 Contributor address; City; State; Zip Code Houston, TX 77007 | 7 Amount of Contribution (\$) \$70.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 01/07/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dougherty, James Contributor address; City; State; Zip Code Houston, TX 77007 | Amount of Contribution (\$) \$70.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dougherty, James Contributor address; City; State; Zip Code Houston, TX 77007 | Amount of Contribution (\$) \$70.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Michael Contributor address; City; State; Zip Code Houston, TX 77019 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 04/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Michael Contributor address; City; State; Zip Code Houston, TX 77019 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/29 Rpt: 12/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 04/15/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Michael 6 Contributor address; City; State; Zip Code Houston, TX 77019 | 7 Amount of Contribution (\$) \$200.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 04/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Michael Contributor address; City; State; Zip Code Houston, TX 77019 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 05/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Michael Contributor address; City; State; Zip Code Houston, TX 77019 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Driscoll, Vic Contributor address; City; State; Zip Code Houston, TX 77005 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 06/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Amanda Contributor address; City; State; Zip Code Houston, TX 77288 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 10/29 Rpt: 13/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 01/22/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott Thornton, Cheryl <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002 | 7 Amount of Contribution (\$) \$75.00 |
| 8 Principal occupation / Job title (See Instructions) Judge | | 9 Employer (See Instructions) |
| Date 01/07/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engelhart, Mike <hr/> Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Judge | | Employer (See Instructions) |
| Date 05/13/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evered, Tim <hr/> Contributor address; City; State; Zip Code Houston, TX 77072 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamez, Nataliya <hr/> Contributor address; City; State; Zip Code Houston, TX 77027 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gartner, Fritz <hr/> Contributor address; City; State; Zip Code Houston, TX 77077 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Executive | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 11/29 Rpt: 14/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 04/15/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gass, Andrew 6 Contributor address; City; State; Zip Code Houston, TX 77271 | 7 Amount of Contribution (\$) \$35.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 01/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Mary Contributor address; City; State; Zip Code Houston, TX 77270 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Mary Contributor address; City; State; Zip Code Houston, TX 77270 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 03/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Mary Contributor address; City; State; Zip Code Houston, TX 77270 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/07/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guttman, Alan Contributor address; City; State; Zip Code Houston, TX 77096 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 12/29 Rpt: 15/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 02/11/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guttman, Alan 6 Contributor address; City; State; Zip Code Houston, TX 77096 | 7 Amount of Contribution (\$) \$35.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guttman, Alan Contributor address; City; State; Zip Code Houston, TX 77096 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Robin Contributor address; City; State; Zip Code Houston, TX 77008 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 03/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartman, Robin Contributor address; City; State; Zip Code Houston, TX 77008 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/04/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Higgins, Sean Contributor address; City; State; Zip Code Houston, TX 77046 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 13/29 Rpt: 16/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 02/11/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Higgins, Sean 6 Contributor address; City; State; Zip Code Houston, TX 77046 | 7 Amount of Contribution (\$) \$35.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 03/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Higgins, Sean Contributor address; City; State; Zip Code Houston, TX 77046 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Craft Contributor address; City; State; Zip Code Houston, TX 77056 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Craft Contributor address; City; State; Zip Code Houston, TX 77056 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaworski, Joe Contributor address; City; State; Zip Code Houston, TX 77009 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 14/29 Rpt: 17/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 01/14/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Amanda 6 Contributor address; City; State; Zip Code Houston, TX 77074 | 7 Amount of Contribution (\$) \$40.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 05/13/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Amanda Contributor address; City; State; Zip Code Houston, TX 77074 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 03/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Frank Contributor address; City; State; Zip Code Houston, TX 77010 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones III, Henry W (Hank) Contributor address; City; State; Zip Code Houston, TX 77077 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 03/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones III, Henry W (Hank) Contributor address; City; State; Zip Code Houston, TX 77077 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 15/29 Rpt: 18/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 01/07/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jonson, William 6 Contributor address; City; State; Zip Code Houston, TX 77099 | 7 Amount of Contribution (\$) \$75.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 02/04/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaiser, Jeffery Contributor address; City; State; Zip Code Houston, TX 77098 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kamins, Anna Contributor address; City; State; Zip Code Houston, TX 77227 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ketai, Lisa Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ketai, Lisa Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 16/29 Rpt: 19/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 03/25/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Vivian 6 Contributor address; City; State; Zip Code Houston, TX 77002 | 7 Amount of Contribution (\$) \$75.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 01/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Vivian Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Vivian Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 03/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirkpatrick, Eric Contributor address; City; State; Zip Code Houston, TX 77227 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landau, Sarah Contributor address; City; State; Zip Code Houston, TX 77004 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 17/29 Rpt: 20/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 03/04/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, UA <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77227 | 7 Amount of Contribution (\$) \$35.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindley, Gregory <hr/> Contributor address; City; State; Zip Code Houston, TX 77056 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litton, Todd <hr/> Contributor address; City; State; Zip Code Houston, TX 77030 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/04/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockett, Elizabeth <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77478 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/07/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, Charles <hr/> Contributor address; City; State; Zip Code Houston, TX 77056 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 18/29 Rpt: 21/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 01/22/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorenz, John 6 Contributor address; City; State; Zip Code Houston, TX 77005 | 7 Amount of Contribution (\$) \$40.00 |
| 8 Principal occupation / Job title (See Instructions) Business Owner | | 9 Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manji, Abel Contributor address; City; State; Zip Code Sugar Land, TX 77479 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manne, Burton Contributor address; City; State; Zip Code Houston, TX 77027 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manne, Burton Contributor address; City; State; Zip Code Houston, TX 77027 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 03/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manne, Burton Contributor address; City; State; Zip Code Houston, TX 77027 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 19/29 Rpt: 22/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 01/07/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markowski, Kevin <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002 | 7 Amount of Contribution (\$) \$35.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 02/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markowski, Kevin <hr/> Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/07/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNiel, Kathryn <hr/> Contributor address; City; State; Zip Code Austin, TX 78708 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/25/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mize, Katherine <hr/> Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales Shaw, Penny <hr/> Contributor address; City; State; Zip Code Houston, TX 77292 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 20/29 Rpt: 23/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 01/28/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nolen, Rand 6 Contributor address; City; State; Zip Code Houston, TX 77056 | 7 Amount of Contribution (\$) \$75.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 01/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nolen, Rand Contributor address; City; State; Zip Code Houston, TX 77056 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nolen, Rand Contributor address; City; State; Zip Code Houston, TX 77056 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 04/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nolen, Rand Contributor address; City; State; Zip Code Houston, TX 77056 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 04/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norris, Danyahel Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 21/29 Rpt: 24/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 01/14/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padley, Drew 6 Contributor address; City; State; Zip Code Houston, TX 77002 | 7 Amount of Contribution (\$) \$35.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 01/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peacock, Jim Contributor address; City; State; Zip Code Houston, TX 77056 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peacock, Jim Contributor address; City; State; Zip Code Houston, TX 77056 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 03/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peacock, Jim Contributor address; City; State; Zip Code Houston, TX 77056 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 04/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pedersen, Nicole Contributor address; City; State; Zip Code Houston, TX 77003 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 22/29 Rpt: 25/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 01/22/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pesikoff, Bette 6 Contributor address; City; State; Zip Code Houston, TX 77098 | 7 Amount of Contribution (\$) \$35.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pesikoff, Bette Contributor address; City; State; Zip Code Houston, TX 77098 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/07/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radnofsky, Barbara Contributor address; City; State; Zip Code Houston, TX 77339 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 03/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radnofsky, Barbara Contributor address; City; State; Zip Code Houston, TX 77339 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 04/08/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radnofsky, Barbara Contributor address; City; State; Zip Code Houston, TX 77339 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 23/29 Rpt: 26/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 01/22/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Judith 6 Contributor address; City; State; Zip Code Houston, TX 77002 | 7 Amount of Contribution (\$) \$35.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Judith Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rendon, Josefina Contributor address; City; State; Zip Code Houston, TX 77017 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rendon, Ruben Contributor address; City; State; Zip Code Houston, TX 77017 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Christopher Contributor address; City; State; Zip Code Houston, TX 77027 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 24/29 Rpt: 27/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 05/20/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riedmueller, Norman <hr/> 6 Contributor address; City; State; Zip Code Galveston, TX 77550 | 7 Amount of Contribution (\$) \$75.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 01/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77003 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77003 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 03/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77003 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/07/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Tim <hr/> Contributor address; City; State; Zip Code Houston, TX 77007 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 25/29 Rpt: 28/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 04/15/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Tim 6 Contributor address; City; State; Zip Code Houston, TX 77007 | 7 Amount of Contribution (\$) \$35.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 06/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Cawlyn Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 04/08/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenwinkel, Ann Contributor address; City; State; Zip Code Houston, TX 77006 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Architect | | Employer (See Instructions) |
| Date 01/07/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutter, Kent Contributor address; City; State; Zip Code Houston, TX 77010 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutter, Kent Contributor address; City; State; Zip Code Houston, TX 77010 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 26/29 Rpt: 29/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 04/15/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schechter, Arthur 6 Contributor address; City; State; Zip Code Houston, TX 77006 | 7 Amount of Contribution (\$) \$80.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 01/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schreiber, Joseph Contributor address; City; State; Zip Code Houston, TX 77024 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Penny Contributor address; City; State; Zip Code Houston, TX 77292 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snow, Joellen Contributor address; City; State; Zip Code Houston, TX 77008 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Charles Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 27/29 Rpt: 30/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 06/10/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Charles <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002 | 7 Amount of Contribution (\$) \$275.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 04/01/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strickland, Stormy <hr/> Contributor address; City; State; Zip Code Kerville, TX 78028 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Coleman <hr/> Contributor address; City; State; Zip Code Houston, TX 77019 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Fleet, Allan <hr/> Contributor address; City; State; Zip Code Houston, TX 77081 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/07/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallenstein, Josh <hr/> Contributor address; City; State; Zip Code Houston, TX 77077 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 28/29 Rpt: 31/48 |
| 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 04/08/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallenstein, Josh <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77077 | 7 Amount of Contribution (\$) \$35.00 |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) |
| Date 03/04/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waterson, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77077 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Clinton <hr/> Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 01/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkins, Madeleine <hr/> Contributor address; City; State; Zip Code Houston, TX 77027 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) |
| Date 02/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willms, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77002 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) Non-Attorney | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 29/29 Rpt: 32/48

2 FILER NAME

Harris County Democratic Lawyers' Association Inc.

3 Filer ID (Ethics Commission Filers)
00055728

4 Date
01/22/2025

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)

Wisch, Steve

7 Amount of Contribution (\$)
\$35.00

6 Contributor address; City; State; Zip Code

Houston, TX 77025

8 Principal occupation / Job title (See Instructions)

Attorney

9 Employer (See Instructions)

Date
02/19/2025

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Wisch, Steve

Amount of Contribution (\$)
\$35.00

Contributor address; City; State; Zip Code

Houston, TX 77025

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Date
03/18/2025

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Wisch, Steve

Amount of Contribution (\$)
\$35.00

Contributor address; City; State; Zip Code

Houston, TX 77025

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Date
04/15/2025

Full name of contributor ☐ out-of-state PAC (ID#: _____)

Wisch, Steve

Amount of Contribution (\$)
\$35.00

Contributor address; City; State; Zip Code

Houston, TX 77025

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 1/16 Rpt: 33/48 | 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 02/19/2025 | 5 Payee name Carter and Hatcher | |
| 6 Amount (\$) \$507.50 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 7447 Houston, TX 77248 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/24/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Carter and Hatcher | | |
| Amount (\$) \$93.75 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 7447 Houston, TX 77248 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 04/02/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Carter and Hatcher | | |
| Amount (\$) \$70.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 7447 Houston, TX 77248 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 2/16 Rpt: 34/48 | 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 05/05/2025 | 5 Payee name Carter and Hatcher | |
| 6 Amount (\$) \$37.50 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 7447 Houston, TX 77248 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/27/2025 | Payee name Carter and Hatcher | |
| Amount (\$) \$168.75 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 7447 Houston, TX 77248 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 06/20/2025 | Payee name Carter and Hatcher | |
| Amount (\$) \$150.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 7447 Houston, TX 77248 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 3/16 Rpt: 35/48 | 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 01/24/2025 | 5 Payee name Dang, Kimberly | |
| 6 Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 3333 Lake St Unit F Houston, TX 77098 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/18/2025 | Candidate/Officeholder name Dang, Kimberly | |
| Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds | Office sought Office held | |
| | Payee name Dang, Kimberly | |
| | Payee address; City; State; Zip Code 3333 Lake St Unit F Houston, TX 77098 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/18/2025 | Candidate/Officeholder name Dang, Kimberly | |
| Amount (\$) \$631.51 <input type="checkbox"/> Expenditure from corporate funds | Office sought Office held | |
| | Payee name Dang, Kimberly | |
| | Payee address; City; State; Zip Code 3333 Lake St Unit F Houston, TX 77098 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 4/16 Rpt: 36/48 | 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 02/03/2025 | 5 Payee name Dang, Kimberly | |
| 6 Amount (\$) \$1,035.76 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 3333 Lake St Unit F Houston, TX 77098 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/31/2025 | Candidate/Officeholder name Frost Bank | |
| Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 1600 San Antonio, TX 78296 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/28/2025 | Candidate/Officeholder name Frost Bank | |
| Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 1600 San Antonio, TX 78296 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 5/16 Rpt: 37/48 | 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 02/28/2025 | 5 Payee name Frost Bank | |
| 6 Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 1600 San Antonio, TX 78296 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/31/2025 | Candidate/Officeholder name Office sought Office held | |
| Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds | Payee name Frost Bank Payee address; City; State; Zip Code PO Box 1600 San Antonio, TX 78296 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 04/30/2025 | Candidate/Officeholder name Office sought Office held | |
| Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds | Payee name Frost Bank Payee address; City; State; Zip Code PO Box 1600 San Antonio, TX 78296 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 6/16 Rpt: 38/48 | 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 05/31/2025 | 5 Payee name Frost Bank | |
| 6 Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 1600 San Antonio, TX 78296 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 06/30/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Frost Bank | | |
| Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 1600 San Antonio, TX 78296 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/06/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Neon One, LLC | | |
| Amount (\$) \$166.50 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 7/16 Rpt: 39/48 | 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 02/05/2025 | 5 Payee name Neon One, LLC | |
| 6 Amount (\$) \$166.50 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/05/2025 | Payee name Neon One, LLC | |
| Amount (\$) \$166.50 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/07/2025 | Payee name Neon One, LLC | |
| Amount (\$) \$166.50 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 8/16 Rpt: 40/48 | 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 05/05/2025 | 5 Payee name Neon One, LLC | |
| 6 Amount (\$) \$166.50 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 06/05/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Neon One, LLC | | |
| Amount (\$) \$166.50 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 01/07/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Neon One, LLC | | |
| Amount (\$) \$29.42 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: Sch: 9/16 Rpt: 41/48 | 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 01/14/2025 | 5 Payee name Neon One, LLC | |
| 6 Amount (\$) \$33.34 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/22/2025 | Payee name Neon One, LLC | |
| Amount (\$) \$47.20 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 01/28/2025 | Payee name Neon One, LLC | |
| Amount (\$) \$4.98 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: Sch: 10/16 Rpt: 42/48 | 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 02/04/2025 | 5 Payee name Neon One, LLC | |
| 6 Amount (\$) \$14.86 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/11/2025 | Candidate/Officeholder name Office sought Office held | |
| Date 02/11/2025 | Payee name Neon One, LLC | |
| Amount (\$) \$20.86 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/19/2025 | Candidate/Officeholder name Office sought Office held | |
| Date 02/19/2025 | Payee name Neon One, LLC | |
| Amount (\$) \$33.83 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 11/16 Rpt: 43/48 | 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 02/25/2025 | 5 Payee name Neon One, LLC | |
| 6 Amount (\$) \$2.45 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/04/2025 | Payee name Neon One, LLC | |
| Amount (\$) \$12.10 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/11/2025 | Payee name Neon One, LLC | |
| Amount (\$) \$9.10 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: Sch: 12/16 Rpt: 44/48 | 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 03/18/2025 | 5 Payee name Neon One, LLC | |
| 6 Amount (\$) \$12.25 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/25/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Neon One, LLC | | |
| Amount (\$) \$2.68 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 04/01/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Neon One, LLC | | |
| Amount (\$) \$2.45 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: Sch: 13/16 Rpt: 45/48 | 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 04/08/2025 | 5 Payee name Neon One, LLC | |
| 6 Amount (\$) \$15.11 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/05/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Neon One, LLC | | |
| Amount (\$) \$8.04 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/13/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Neon One, LLC | | |
| Amount (\$) \$4.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 14/16 Rpt: 46/48 | 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 05/20/2025 | 5 Payee name Neon One, LLC | |
| 6 Amount (\$) \$1.47 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 05/20/2025 | Payee name Neon One, LLC | |
| Amount (\$) \$2.52 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/03/2025 | Payee name Neon One, LLC | |
| Amount (\$) \$11.89 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 15/16 Rpt: 47/48 | 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 06/10/2025 | 5 Payee name Neon One, LLC | |
| 6 Amount (\$) \$8.05 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/15/2025 | Payee name Neon One, LLC | |
| Amount (\$) \$27.88 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4545 N Ravenswood Ave Floor 2 Chicago, IL 60640 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/24/2025 | Payee name State Bar of Texas | |
| Amount (\$) \$254.60 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1414 Colorado Street Austin, TX 78701 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|---|
| 1 Total pages Schedule F1: Sch: 16/16 Rpt: 48/48 | 2 FILER NAME Harris County Democratic Lawyers' Association Inc. | 3 Filer ID (Ethics Commission Filers) 00055728 |
| 4 Date 05/13/2025 | 5 Payee name State Bar of Texas | |
| 6 Amount (\$) \$101.84 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1414 Colorado Street Austin, TX 78701 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |