

COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT

FORM CEC
COVER SHEET PG 1

The CEC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00015507	2 Total pages filed: 151
3 COMMITTEE NAME Harris County Democratic Party (CEC)			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/15/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3302 Canal St Houston, TX 77003		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Michael P. NICKNAME LAST SUFFIX Doyle		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3302 Canal St Houston, TX 77003		
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3401 Allen Parkway Suite 100 Houston, TX 77019		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (713) 554-9079		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Final Report <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	

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COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC
COVER SHEET PG 2

12 COMMITTEE NAME Harris County Democratic Party (CEC)		13 Filer ID (Ethics Commission Filers) 00015507	
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.)	Democrat	
	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	\$ 10.00
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 78,976.81	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00	
	4. TOTAL POLITICAL EXPENDITURES	\$ 219,340.25	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 13,030.36	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 75,000.00	

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.

Michael P. Doyle

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

COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE

FORM CEC
ADDENDUM

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12 COMMITTEE NAME Harris County Democratic Party (CEC)		13 Filer ID (Ethics Commission Filers) 00015507
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 Democrat
		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.)	

SUBTOTALS - CEC**FORM CEC**
COVER SHEET PG 3
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17 COMMITTEE NAME Harris County Democratic Party (CEC)		18 Filer ID (Ethics Commission Filers) 00015507
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 77,236.10
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,740.71
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 75,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 181,768.99
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 37,571.26
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
10.	<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: 1/79 Rpt: 5/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 04/04/2025	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00011114) AFSCME P E O P L E <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78754-3831	7 Amount of Contribution (\$) \$525.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:) Alcorn, Sallie Comstock (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-4105	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Houston City Council Member		Employer (See Instructions) City of Houston
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:) Alcorn, Sallie Comstock (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-4105	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Houston City Council Member		Employer (See Instructions) City of Houston
Date 03/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:) Alcorn, Sallie Comstock (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-4105	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Houston City Council Member		Employer (See Instructions) City of Houston
Date 04/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:) Alcorn, Sallie Comstock (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-4105	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Houston City Council Member		Employer (See Instructions) City of Houston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/79 Rpt: 6/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Lillian Denree (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77004	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) State of Texas
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Lillian Denree (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas
Date 01/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alma Allen Campaign <hr/> Contributor address; City; State; Zip Code Houston, TX 77047-2801	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Kelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77292-5922	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 03/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Kelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77292-5922	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/79 Rpt: 7/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 04/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Kelley <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77292-5922	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Harris County
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Kelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77292-5922	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Kelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77292-5922	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ann Johnson Campaign <hr/> Contributor address; City; State; Zip Code Houston, TX 77256-6286	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkins, Mrs. T. H. <hr/> Contributor address; City; State; Zip Code Houston, TX 77028-3849	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Education

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/79 Rpt: 8/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkins, Mrs. T. H. <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77028-3849	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Education
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkins, Mrs. T. H. <hr/> Contributor address; City; State; Zip Code Houston, TX 77028-3849	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Education
Date 03/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkins, Mrs. T. H. <hr/> Contributor address; City; State; Zip Code Houston, TX 77028-3849	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Education
Date 04/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkins, Mrs. T. H. <hr/> Contributor address; City; State; Zip Code Houston, TX 77028-3849	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Education
Date 05/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkins, Mrs. T. H. <hr/> Contributor address; City; State; Zip Code Houston, TX 77028-3849	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Education

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/79 Rpt: 9/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 06/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkins, Mrs. T. H. <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77028-3849	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Education
Date 01/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Lucia <hr/> Contributor address; City; State; Zip Code Houston, TX 77049-5701	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Justice of the Peace		Employer (See Instructions) Harris County Precinct 3 Place 2
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Lucia <hr/> Contributor address; City; State; Zip Code Houston, TX 77049-5701	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Justice of the Peace		Employer (See Instructions) Harris County Precinct 3 Place 2
Date 03/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Lucia <hr/> Contributor address; City; State; Zip Code Houston, TX 77049-5701	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Justice of the Peace		Employer (See Instructions) Harris County Precinct 3 Place 2
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Lucia <hr/> Contributor address; City; State; Zip Code Houston, TX 77049-5701	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Justice of the Peace		Employer (See Instructions) Harris County Precinct 3 Place 2

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/79 Rpt: 10/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 06/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Lucia <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77049-5701	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Justice of the Peace		9 Employer (See Instructions) Harris County Precinct 3 Place 2
Date 05/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bayou Blue Democrats <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-4138	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bayou Blue Democrats <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-4138	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellaire Democrats <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401-3324	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berg, Janice L (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77080-7607	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/79 Rpt: 11/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berg, Janice L (Judge) 6 Contributor address; City; State; Zip Code Houston, TX 77080-7607	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) State of Texas
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berg, Janice L (Judge) Contributor address; City; State; Zip Code Houston, TX 77080-7607	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berg, Janice L (Judge) Contributor address; City; State; Zip Code Houston, TX 77080-7607	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas
Date 04/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berg, Janice L (Judge) Contributor address; City; State; Zip Code Houston, TX 77080-7607	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas
Date 05/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berg, Janice L (Judge) Contributor address; City; State; Zip Code Houston, TX 77080-7607	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/79 Rpt: 12/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berg, Janice L (Judge) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77080-7607	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) State of Texas
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berg, Janice L (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77080-7607	Amount of Contribution (\$) \$103.45
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berg, Janice L (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77080-7607	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas
Date 03/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobholz, Keegan <hr/> Contributor address; City; State; Zip Code Houston, TX 77008-3706	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Kirkland & Ellis LLP
Date 01/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briones, Lesley <hr/> Contributor address; City; State; Zip Code Houston, TX 77008-3903	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Commissioner		Employer (See Instructions) Harris County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/79 Rpt: 13/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briones, Lesley <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77008-3903	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Commissioner		9 Employer (See Instructions) Harris County
Date 03/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briones, Lesley <hr/> Contributor address; City; State; Zip Code Houston, TX 77008-3903	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Commissioner		Employer (See Instructions) Harris County
Date 01/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadnax, Desiree <hr/> Contributor address; City; State; Zip Code Houston, TX 77049-3989	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Division Manager		Employer (See Instructions) HCDA
Date 02/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadnax, Desiree <hr/> Contributor address; City; State; Zip Code Houston, TX 77049-3989	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Division Manager		Employer (See Instructions) HCDA
Date 03/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broadnax, Desiree <hr/> Contributor address; City; State; Zip Code Houston, TX 77049-3989	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Division Manager		Employer (See Instructions) HCDA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/79 Rpt: 14/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruck, Ryan <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20005-1987	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Law Student		9 Employer (See Instructions) Student
Date 02/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruck, Ryan <hr/> Contributor address; City; State; Zip Code Washington, DC 20005-1987	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Law Student		Employer (See Instructions) Student
Date 01/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Marilyn Kaye <hr/> Contributor address; City; State; Zip Code Houston, TX 77086-1793	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Elected Official - District Clerk		Employer (See Instructions) Harris County
Date 02/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Marilyn Kaye <hr/> Contributor address; City; State; Zip Code Houston, TX 77086-1793	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Elected Official - District Clerk		Employer (See Instructions) Harris County
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Marilyn Kaye <hr/> Contributor address; City; State; Zip Code Houston, TX 77086-1793	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Elected Official - District Clerk		Employer (See Instructions) Harris County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/79 Rpt: 15/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 04/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Marilyn Kaye 6 Contributor address; City; State; Zip Code Houston, TX 77086-1793	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Elected Official - District Clerk		9 Employer (See Instructions) Harris County
Date 04/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Marilyn Kaye Contributor address; City; State; Zip Code Houston, TX 77086-1793	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Elected Official - District Clerk		Employer (See Instructions) Harris County
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Marilyn Kaye Contributor address; City; State; Zip Code Houston, TX 77086-1793	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Elected Official - District Clerk		Employer (See Instructions) Harris County
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Marilyn Kaye Contributor address; City; State; Zip Code Houston, TX 77086-1793	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Elected Official - District Clerk		Employer (See Instructions) Harris County
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Marilyn Kaye Contributor address; City; State; Zip Code Houston, TX 77086-1793	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Elected Official - District Clerk		Employer (See Instructions) Harris County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/79 Rpt: 16/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Kyle (Judge) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77004-5946	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) State of Texas
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Kyle (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-5946	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 03/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Kyle (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-5946	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Kyle (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-5946	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Kyle (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-5946	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/79 Rpt: 17/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 06/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Kyle (Judge) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77004-5946	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) State of Texas
Date 05/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo Jr., Mario Anthony <hr/> Contributor address; City; State; Zip Code Houston, TX 77009-8513	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Councilmember		Employer (See Instructions) City of Houston
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo Jr., Mario Anthony <hr/> Contributor address; City; State; Zip Code Houston, TX 77009-8513	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Councilmember		Employer (See Instructions) City of Houston
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Rabeea (Judge) <hr/> Contributor address; City; State; Zip Code Humble, TX 77396-3428	Amount of Contribution (\$) \$517.75
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Rabeea (Judge) <hr/> Contributor address; City; State; Zip Code Humble, TX 77396-3428	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/79 Rpt: 18/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Rabeea (Judge) <hr/> 6 Contributor address; City; State; Zip Code Humble, TX 77396-3428	7 Amount of Contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Texas
Date 03/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Rabeea (Judge) <hr/> Contributor address; City; State; Zip Code Humble, TX 77396-3428	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Rabeea (Judge) <hr/> Contributor address; City; State; Zip Code Humble, TX 77396-3428	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Rabeea (Judge) <hr/> Contributor address; City; State; Zip Code Humble, TX 77396-3428	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Rabeea (Judge) <hr/> Contributor address; City; State; Zip Code Humble, TX 77396-3428	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/79 Rpt: 19/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Jason Andrew (Judge)	7 Amount of Contribution (\$) \$60.00
	6 Contributor address; City; State; Zip Code Houston, TX 77008-6240	
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) HARRIS COUNTY
Date 02/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Jason Andrew (Judge)	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Houston, TX 77008-6240	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) HARRIS COUNTY
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Jason Andrew (Judge)	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Houston, TX 77008-6240	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) HARRIS COUNTY
Date 03/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Jason Andrew (Judge)	Amount of Contribution (\$) \$312.50
	Contributor address; City; State; Zip Code Houston, TX 77008-6240	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) HARRIS COUNTY
Date 04/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Jason Andrew (Judge)	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Houston, TX 77008-6240	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) HARRIS COUNTY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/79 Rpt: 20/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Jason Andrew (Judge) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77008-6240	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) HARRIS COUNTY
Date 05/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Jason Andrew (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77008-6240	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) HARRIS COUNTY
Date 06/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Jason Andrew (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77008-6240	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) HARRIS COUNTY
Date 01/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craft-Demming, Tamika <hr/> Contributor address; City; State; Zip Code Humble, TX 77346-3127	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craft-Demming, Tamika <hr/> Contributor address; City; State; Zip Code Humble, TX 77346-3127	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/79 Rpt: 21/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craft-Demming, Tamika <hr/> 6 Contributor address; City; State; Zip Code Humble, TX 77346-3127	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) State of Texas
Date 04/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craft-Demming, Tamika <hr/> Contributor address; City; State; Zip Code Humble, TX 77346-3127	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craft-Demming, Tamika <hr/> Contributor address; City; State; Zip Code Humble, TX 77346-3127	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craft-Demming, Tamika <hr/> Contributor address; City; State; Zip Code Humble, TX 77346-3127	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 01/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crenshaw, Jan Carol (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77015-3132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/79 Rpt: 22/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crenshaw, Jan Carol (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77015-3132	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 03/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crenshaw, Jan Carol (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77015-3132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crenshaw, Jan Carol (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77015-3132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crenshaw, Jan Carol (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77015-3132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crenshaw, Jan Carol (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77015-3132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/79 Rpt: 23/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curvey, Damiane Dianne <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77070-1762	7 Amount of Contribution (\$) \$155.08
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) State of texas
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curvey, Damiane Dianne <hr/> Contributor address; City; State; Zip Code Houston, TX 77070-1762	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of texas
Date 01/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cypress-Tomball Democrats <hr/> Contributor address; City; State; Zip Code Houston, TX 77070-2458	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darrah, Glenn <hr/> Contributor address; City; State; Zip Code Houston, TX 77025-4543	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Economic Analyst		Employer (See Instructions) StaffLink Inc
Date 02/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darrah, Glenn <hr/> Contributor address; City; State; Zip Code Houston, TX 77025-4543	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Economic Analyst		Employer (See Instructions) StaffLink Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/79 Rpt: 24/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darrah, Glenn <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77025-4543	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Economic Analyst		9 Employer (See Instructions) StaffLink Inc
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darrah, Glenn <hr/> Contributor address; City; State; Zip Code Houston, TX 77025-4543	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Economic Analyst		Employer (See Instructions) StaffLink Inc
Date 05/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darrah, Glenn <hr/> Contributor address; City; State; Zip Code Houston, TX 77025-4543	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Economic Analyst		Employer (See Instructions) StaffLink Inc
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darrah, Glenn <hr/> Contributor address; City; State; Zip Code Houston, TX 77025-4543	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Economic Analyst		Employer (See Instructions) StaffLink Inc
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Samantha <hr/> Contributor address; City; State; Zip Code Houston, TX 77231-0682	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/79 Rpt: 25/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Samantha 6 Contributor address; City; State; Zip Code Houston, TX 77231-0682	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Harris County
Date 03/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Samantha Contributor address; City; State; Zip Code Houston, TX 77231-0682	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 04/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Samantha Contributor address; City; State; Zip Code Houston, TX 77231-0682	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Samantha Contributor address; City; State; Zip Code Houston, TX 77231-0682	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Samantha Contributor address; City; State; Zip Code Houston, TX 77231-0682	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/79 Rpt: 26/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Democratic Club of The Woodlands <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77393-3321	7 Amount of Contribution (\$) \$6,187.49
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denrler, Kate <hr/> Contributor address; City; State; Zip Code Conroe, TX 77385-3479	Amount of Contribution (\$) \$26.13
Principal occupation / Job title (See Instructions) Chief of staff		Employer (See Instructions) District C City of Houston
Date 06/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denrler, Kate <hr/> Contributor address; City; State; Zip Code Conroe, TX 77385-3479	Amount of Contribution (\$) \$26.13
Principal occupation / Job title (See Instructions) Chief of staff		Employer (See Instructions) District C City of Houston
Date 01/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donna Roth for Judge <hr/> Contributor address; City; State; Zip Code Houston, TX 77007-7524	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Draper, Genesis <hr/> Contributor address; City; State; Zip Code Houston, TX 77021-1646	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/79 Rpt: 27/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Draper, Genesis 6 Contributor address; City; State; Zip Code Houston, TX 77021-1646	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Harris County
Date 03/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Draper, Genesis Contributor address; City; State; Zip Code Houston, TX 77021-1646	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Draper, Genesis Contributor address; City; State; Zip Code Houston, TX 77021-1646	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Draper, Genesis Contributor address; City; State; Zip Code Houston, TX 77021-1646	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Draper, Genesis Contributor address; City; State; Zip Code Houston, TX 77021-1646	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/79 Rpt: 28/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duble, Steven Michael 6 Contributor address; City; State; Zip Code Houston, TX 77098-1426	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Justice of the Peace		9 Employer (See Instructions) Harris County Texas
Date 02/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duble, Steven Michael Contributor address; City; State; Zip Code Houston, TX 77098-1426	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Justice of the Peace		Employer (See Instructions) Harris County Texas
Date 03/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duble, Steven Michael Contributor address; City; State; Zip Code Houston, TX 77098-1426	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Justice of the Peace		Employer (See Instructions) Harris County Texas
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duble, Steven Michael Contributor address; City; State; Zip Code Houston, TX 77098-1426	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Justice of the Peace		Employer (See Instructions) Harris County Texas
Date 05/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duble, Steven Michael Contributor address; City; State; Zip Code Houston, TX 77098-1426	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Justice of the Peace		Employer (See Instructions) Harris County Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/79 Rpt: 29/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 06/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duble, Steven Michael <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77098-1426	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Justice of the Peace		9 Employer (See Instructions) Harris County Texas
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunson, Linda Marie (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-5142	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 02/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunson, Linda Marie (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-5142	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 03/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunson, Linda Marie (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-5142	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 03/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunson, Linda Marie (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-5142	Amount of Contribution (\$) \$77.64
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/79 Rpt: 30/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 04/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunson, Linda Marie (Judge) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77004-5142	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) State of Texas
Date 05/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunson, Linda Marie (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-5142	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunson, Linda Marie (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-5142	Amount of Contribution (\$) \$103.45
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunson, Linda Marie (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-5142	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 04/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) East Houston Democrats <hr/> Contributor address; City; State; Zip Code Houston, TX 77044-2253	Amount of Contribution (\$) \$181.38
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/79 Rpt: 31/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans-Shabazz, Carolyn Edwina <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77004-6210	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Council Member		9 Employer (See Instructions) City of Houston
Date 02/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans-Shabazz, Carolyn Edwina <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-6210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Council Member		Employer (See Instructions) City of Houston
Date 03/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans-Shabazz, Carolyn Edwina <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-6210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Council Member		Employer (See Instructions) City of Houston
Date 04/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans-Shabazz, Carolyn Edwina <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-6210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Council Member		Employer (See Instructions) City of Houston
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans-Shabazz, Carolyn Edwina <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-6210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Council Member		Employer (See Instructions) City of Houston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/79 Rpt: 32/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 06/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans-Shabazz, Carolyn Edwina <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77004-6210	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Council Member		9 Employer (See Instructions) City of Houston
Date 01/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fallon, Jennifer <hr/> Contributor address; City; State; Zip Code Houston, TX 77006-3241	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fallon, Jennifer <hr/> Contributor address; City; State; Zip Code Houston, TX 77006-3241	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fallon, Jennifer <hr/> Contributor address; City; State; Zip Code Houston, TX 77006-3241	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fallon, Jennifer <hr/> Contributor address; City; State; Zip Code Houston, TX 77006-3241	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/79 Rpt: 33/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fallon, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77006-3241	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fallon, Jennifer <hr/> Contributor address; City; State; Zip Code Houston, TX 77006-3241	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finch, Toria <hr/> Contributor address; City; State; Zip Code Humble, TX 77396-1972	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finch, Toria <hr/> Contributor address; City; State; Zip Code Humble, TX 77396-1972	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 01/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frame, William George <hr/> Contributor address; City; State; Zip Code Houston, TX 77034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/79 Rpt: 34/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frame, William George <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77034	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 03/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frame, William George <hr/> Contributor address; City; State; Zip Code Houston, TX 77034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frame, William George <hr/> Contributor address; City; State; Zip Code Houston, TX 77034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frame, William George <hr/> Contributor address; City; State; Zip Code Houston, TX 77034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frame, William George <hr/> Contributor address; City; State; Zip Code Houston, TX 77034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/79 Rpt: 35/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaido, Colleen 6 Contributor address; City; State; Zip Code Houston, TX 77005-3529	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Statw of Texas
Date 02/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaido, Colleen Contributor address; City; State; Zip Code Houston, TX 77005-3529	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Statw of Texas
Date 03/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaido, Colleen Contributor address; City; State; Zip Code Houston, TX 77005-3529	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Statw of Texas
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaido, Colleen Contributor address; City; State; Zip Code Houston, TX 77005-3529	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Statw of Texas
Date 05/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaido, Colleen Contributor address; City; State; Zip Code Houston, TX 77005-3529	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Statw of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/79 Rpt: 36/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 06/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaido, Colleen <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005-3529	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Statw of Texas
Date 01/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Tanya (Judge) <hr/> Contributor address; City; State; Zip Code Houston Texas, TX 77046-1130	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Tanya (Judge) <hr/> Contributor address; City; State; Zip Code Houston Texas, TX 77046-1130	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas
Date 03/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Tanya (Judge) <hr/> Contributor address; City; State; Zip Code Houston Texas, TX 77046-1130	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas
Date 04/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Tanya (Judge) <hr/> Contributor address; City; State; Zip Code Houston Texas, TX 77046-1130	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/79 Rpt: 37/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Tanya (Judge) <hr/> 6 Contributor address; City; State; Zip Code Houston Texas, TX 77046-1130	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) State of Texas
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Tanya (Judge) <hr/> Contributor address; City; State; Zip Code Houston Texas, TX 77046-1130	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gene For Texas <hr/> Contributor address; City; State; Zip Code Houston, TX 77274-2442	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Germaine J Tanner Campaign Fund <hr/> Contributor address; City; State; Zip Code Houston, TX 77269-1612	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilliam, Lance (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77009-7715	Amount of Contribution (\$) \$15.78
Principal occupation / Job title (See Instructions) Travel Advisor		Employer (See Instructions) All World Travel

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/79 Rpt: 38/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 06/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilliam, Lance (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77009-7715	7 Amount of Contribution (\$) \$15.78
8 Principal occupation / Job title (See Instructions) Travel Advisor		9 Employer (See Instructions) All World Travel
Date 01/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Edward <hr/> Contributor address; City; State; Zip Code Houston, TX 77270-0683	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 01/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves-Harrington, Angela (Judge) <hr/> Contributor address; City; State; Zip Code Humble, TX 77346-4401	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves-Harrington, Angela (Judge) <hr/> Contributor address; City; State; Zip Code Humble, TX 77346-4401	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves-Harrington, Angela (Judge) <hr/> Contributor address; City; State; Zip Code Humble, TX 77346-4401	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/79 Rpt: 39/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 04/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves-Harrington, Angela (Judge)	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Humble, TX 77346-4401		
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) State of Texas
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves-Harrington, Angela (Judge)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Humble, TX 77346-4401		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves-Harrington, Angela (Judge)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Humble, TX 77346-4401		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves-Harrington, Angela (Judge)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Humble, TX 77346-4401		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves-Harrington, Angela (Judge)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Humble, TX 77346-4401		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/79 Rpt: 40/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Amparo (Judge) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77018-5237	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) 1st Court of Appeals
Date 04/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Amparo (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77018-5237	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) 1st Court of Appeals
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Amparo (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77018-5237	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) 1st Court of Appeals
Date 06/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Amparo (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77018-5237	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) 1st Court of Appeals
Date 01/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ursula ANTOINETTE (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002-1901	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/79 Rpt: 41/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ursula ANTOINETTE (Judge)	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Houston, TX 77002-1901		
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) State of Texas
Date 03/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ursula ANTOINETTE (Judge)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Houston, TX 77002-1901		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 04/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ursula ANTOINETTE (Judge)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Houston, TX 77002-1901		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ursula ANTOINETTE (Judge)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Houston, TX 77002-1901		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ursula ANTOINETTE (Judge)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Houston, TX 77002-1901		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/79 Rpt: 42/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Handley, Bruce <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77077-3829	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 04/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Handley, Bruce <hr/> Contributor address; City; State; Zip Code Houston, TX 77077-3829	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Handley, Bruce <hr/> Contributor address; City; State; Zip Code Houston, TX 77077-3829	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Handley, Bruce <hr/> Contributor address; City; State; Zip Code Houston, TX 77077-3829	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Sonya Leah (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77001-0811	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Texas Judiciary

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/79 Rpt: 43/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Sonya Leah (Judge)	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Houston, TX 77001-0811	
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Texas Judiciary
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Sonya Leah (Judge)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77001-0811	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Texas Judiciary
Date 03/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Sonya Leah (Judge)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77001-0811	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Texas Judiciary
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Sonya Leah (Judge)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77001-0811	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Texas Judiciary
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Sonya Leah (Judge)	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Houston, TX 77001-0811	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Texas Judiciary

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/79 Rpt: 44/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Sonya Leah (Judge) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77001-0811	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Texas Judiciary
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Sonya Leah (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77001-0811	Amount of Contribution (\$) \$103.45
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Texas Judiciary
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Sonya Leah (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77001-0811	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Texas Judiciary
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Sonya Leah (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77001-0811	Amount of Contribution (\$) \$51.83
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Texas Judiciary
Date 01/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Ana Elizabeth (The Honorable) <hr/> Contributor address; City; State; Zip Code Houston, TX 77007-7004	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) State Representative		Employer (See Instructions) State Representative District 143

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/79 Rpt: 45/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horwitz, James Stanley (Judge)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Houston, TX 77002-1901	
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Harris County
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Erica Roche (Ms.)	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code Houston, TX 77035-6635	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 01/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Ann E.	Amount of Contribution (\$) \$1,035.25
	Contributor address; City; State; Zip Code Houston, TX 77008-3903	
Principal occupation / Job title (See Instructions) State Representative		Employer (See Instructions) State of Texas
Date 01/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Darrell W.	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Houston, TX 77018-4504	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Darrell W.	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Houston, TX 77018-4504	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/79 Rpt: 46/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 06/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judge Jason Cox for Probate Court #3 <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77008-6240	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judge Jerry Simoneaux <hr/> Contributor address; City; State; Zip Code Houston, TX 77035-5515	Amount of Contribution (\$) \$517.75
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katy Jewett Memorial Fund <hr/> Contributor address; City; State; Zip Code Houston, TX 77025-3807	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovach, Jim Fredrick (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77007-7239	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovach, Jim Fredrick (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77007-7239	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/79 Rpt: 47/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovach, Jim Fredrick (Judge)	7 Amount of Contribution (\$) \$322.86
6 Contributor address; City; State; Zip Code Houston, TX 77007-7239		
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Harris County
Date 04/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovach, Jim Fredrick (Judge)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Houston, TX 77007-7239		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovach, Jim Fredrick (Judge)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Houston, TX 77007-7239		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovach, Jim Fredrick (Judge)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Houston, TX 77007-7239		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 05/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancelin, Angela Marie (Judge)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Houston, TX 77035-6005		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Attorney General

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/79 Rpt: 48/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancelin, Angela Marie (Judge) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77035-6005	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Texas Attorney General
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancelin, Angela Marie (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77035-6005	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Attorney General
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancelin, Angela Marie (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77035-6005	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Attorney General
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landau, Sarah Beth (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77009-7214	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Justice		Employer (See Instructions) State of Texas First Court of Appeals
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landau, Sarah Beth (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77009-7214	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Justice		Employer (See Instructions) State of Texas First Court of Appeals

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/79 Rpt: 49/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landau, Sarah Beth (Judge) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77009-7214	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Justice		9 Employer (See Instructions) State of Texas First Court of Appeals
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landau, Sarah Beth (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77009-7214	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Justice		Employer (See Instructions) State of Texas First Court of Appeals
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landau, Sarah Beth (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77009-7214	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Justice		Employer (See Instructions) State of Texas First Court of Appeals
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landau, Sarah Beth (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77009-7214	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Justice		Employer (See Instructions) State of Texas First Court of Appeals
Date 02/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawton Evans, Audrie McVea (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77087-6852	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Harris County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/79 Rpt: 50/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawton Evans, Audrie McVea (Judge)	7 Amount of Contribution (\$) \$312.00
6 Contributor address; City; State; Zip Code Houston, TX 77087-6852		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Harris County
Date 03/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawton Evans, Audrie McVea (Judge)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Houston, TX 77087-6852		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Harris County
Date 04/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawton Evans, Audrie McVea (Judge)	Amount of Contribution (\$) \$77.64
Contributor address; City; State; Zip Code Houston, TX 77087-6852		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Harris County
Date 04/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawton Evans, Audrie McVea (Judge)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Houston, TX 77087-6852		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Harris County
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawton Evans, Audrie McVea (Judge)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Houston, TX 77087-6852		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Harris County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/79 Rpt: 51/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lina Hidalgo for Harris County <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77288-0392	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lina Hidalgo for Harris County <hr/> Contributor address; City; State; Zip Code Houston, TX 77288-0392	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lina Hidalgo for Harris County <hr/> Contributor address; City; State; Zip Code Houston, TX 77288-0392	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lina Hidalgo for Harris County <hr/> Contributor address; City; State; Zip Code Houston, TX 77288-0392	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loeb, Margery (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-4805	Amount of Contribution (\$) \$7,157.75
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/79 Rpt: 52/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Gloria Elizabeth (Judge) <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77379-6566	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Texas
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Gloria Elizabeth (Judge) <hr/> Contributor address; City; State; Zip Code Spring, TX 77379-6566	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Texas
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Gloria Elizabeth (Judge) <hr/> Contributor address; City; State; Zip Code Spring, TX 77379-6566	Amount of Contribution (\$) \$206.70
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Texas
Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Timothy <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-2904	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self-Employed
Date 01/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malik, Nasir <hr/> Contributor address; City; State; Zip Code Spring, TX 77379-8201	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Self-Employed		Employer (See Instructions) Self-Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/79 Rpt: 53/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 04/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medina, Pamela Ann (Judge) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005-2652	7 Amount of Contribution (\$) \$312.50
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Harris County Probate Court No. 2
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medina, Pamela Ann (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-2652	Amount of Contribution (\$) \$720.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County Probate Court No. 2
Date 01/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Menefee, Christian <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-6206	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Harris County Attorney		Employer (See Instructions) Harris County
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molly Cook for State Senate <hr/> Contributor address; City; State; Zip Code Houston, TX 77266-7238	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Michelle (Judge) <hr/> Contributor address; City; State; Zip Code Spring, TX 77379-3966	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/79 Rpt: 54/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Michelle (Judge) <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77379-3966	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Texas
Date 03/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Michelle (Judge) <hr/> Contributor address; City; State; Zip Code Spring, TX 77379-3966	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Texas
Date 04/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Michelle (Judge) <hr/> Contributor address; City; State; Zip Code Spring, TX 77379-3966	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Texas
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Michelle (Judge) <hr/> Contributor address; City; State; Zip Code Spring, TX 77379-3966	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Texas
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Michelle (Judge) <hr/> Contributor address; City; State; Zip Code Spring, TX 77379-3966	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/79 Rpt: 55/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 06/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Christina <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77003-1624	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Funeral Director		9 Employer (See Instructions) Morales Funeral Home
Date 01/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morton, Chris Dean (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Judge 230th District Court Harris County TX		Employer (See Instructions) State of Texas
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morton, Chris Dean (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Judge 230th District Court Harris County TX		Employer (See Instructions) State of Texas
Date 03/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morton, Chris Dean (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Judge 230th District Court Harris County TX		Employer (See Instructions) State of Texas
Date 04/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morton, Chris Dean (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Judge 230th District Court Harris County TX		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/79 Rpt: 56/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morton, Chris Dean (Judge) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Judge 230th District Court Harris County TX		9 Employer (See Instructions) State of Texas
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morton, Chris Dean (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Judge 230th District Court Harris County TX		Employer (See Instructions) State of Texas
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peake, Sandra (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77071-3601	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas/Harris County
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peake, Sandra (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77071-3601	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas/Harris County
Date 03/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peake, Sandra (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77071-3601	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas/Harris County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/79 Rpt: 57/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 04/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peake, Sandra (Judge) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77071-3601	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) State of Texas/Harris County
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peake, Sandra (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77071-3601	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas/Harris County
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peake, Sandra (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77071-3601	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas/Harris County
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peake, Sandra (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77071-3601	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas/Harris County
Date 01/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdue, Nicole Vyrostek (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-3221	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Lawyer (Candidate)		Employer (See Instructions) Self-Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/79 Rpt: 58/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdue, Nicole Vyrostek (Ms.) 6 Contributor address; City; State; Zip Code Houston, TX 77056-3221	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Lawyer (Candidate)		9 Employer (See Instructions) Self-Employed
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdue, Nicole Vyrostek (Ms.) Contributor address; City; State; Zip Code Houston, TX 77056-3221	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Lawyer (Candidate)		Employer (See Instructions) Self-Employed
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdue, Nicole Vyrostek (Ms.) Contributor address; City; State; Zip Code Houston, TX 77056-3221	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Lawyer (Candidate)		Employer (See Instructions) Self-Employed
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdue, Nicole Vyrostek (Ms.) Contributor address; City; State; Zip Code Houston, TX 77056-3221	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Lawyer (Candidate)		Employer (See Instructions) Self-Employed
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdue, Nicole Vyrostek (Ms.) Contributor address; City; State; Zip Code Houston, TX 77056-3221	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Lawyer (Candidate)		Employer (See Instructions) Self-Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/79 Rpt: 59/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poritz, Darwin 6 Contributor address; City; State; Zip Code Houston, TX 77062-2189	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 02/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poritz, Darwin Contributor address; City; State; Zip Code Houston, TX 77062-2189	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poritz, Darwin Contributor address; City; State; Zip Code Houston, TX 77062-2189	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poritz, Darwin Contributor address; City; State; Zip Code Houston, TX 77062-2189	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 05/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poritz, Darwin Contributor address; City; State; Zip Code Houston, TX 77062-2189	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/79 Rpt: 60/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poritz, Darwin <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77062-2189	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not Employed
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quezada, Yahaira <hr/> Contributor address; City; State; Zip Code Houston, TX 77052-3661	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Associate Judge		Employer (See Instructions) Harris county
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, ANNETTE (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77007-8266	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) County Tax Assessor-Collector		Employer (See Instructions) Harris County
Date 03/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMIREZ, ANNETTE (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77007-8266	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) County Tax Assessor-Collector		Employer (See Instructions) Harris County
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Ronald <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459-3802	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) State Representative		Employer (See Instructions) Civitas Engineering Group

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/79 Rpt: 61/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 06/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rios, Anthony EDUARDO <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77007-2618	7 Amount of Contribution (\$) \$15.78
8 Principal occupation / Job title (See Instructions) Financial Analyst		9 Employer (See Instructions) Aericasa
Date 03/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivas-Molloy, Veronica <hr/> Contributor address; City; State; Zip Code Humble, TX 77396-1120	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivas-Molloy, Veronica <hr/> Contributor address; City; State; Zip Code Humble, TX 77396-1120	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 05/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivas-Molloy, Veronica <hr/> Contributor address; City; State; Zip Code Humble, TX 77396-1120	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivas-Molloy, Veronica <hr/> Contributor address; City; State; Zip Code Humble, TX 77396-1120	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/79 Rpt: 62/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 04/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts Markland LLP 6 Contributor address; City; State; Zip Code Houston, TX 77004-7604	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Raul Contributor address; City; State; Zip Code Houston, TX 77017-3019	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County Criminal Court at Law No. 13
Date 01/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Barry Contributor address; City; State; Zip Code Houston, TX 77062-2637	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) CACI NSS Inc.
Date 02/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Barry Contributor address; City; State; Zip Code Houston, TX 77062-2637	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) CACI NSS Inc.
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Barry Contributor address; City; State; Zip Code Houston, TX 77062-2637	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) CACI NSS Inc.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/79 Rpt: 63/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 04/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Barry <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77062-2637	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) CACI NSS Inc.
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Barry <hr/> Contributor address; City; State; Zip Code Houston, TX 77062-2637	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) CACI NSS Inc.
Date 06/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Barry <hr/> Contributor address; City; State; Zip Code Houston, TX 77062-2637	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) CACI NSS Inc.
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salgado, Alex <hr/> Contributor address; City; State; Zip Code Houston, TX 77051-1009	Amount of Contribution (\$) \$62.15
Principal occupation / Job title (See Instructions) Judge County Criminal Court at Law #1		Employer (See Instructions) Harris County Tx
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seilheimer, Dan (Mr.) <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401-5117	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/79 Rpt: 64/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 06/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Penny 6 Contributor address; City; State; Zip Code Houston, TX 77018-6233	7 Amount of Contribution (\$) \$180.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Law office
Date 01/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simoneaux II, Jerry Wayne (Judge) Contributor address; City; State; Zip Code Houston, TX 77235-5282	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simoneaux II, Jerry Wayne (Judge) Contributor address; City; State; Zip Code Houston, TX 77235-5282	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 03/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simoneaux II, Jerry Wayne (Judge) Contributor address; City; State; Zip Code Houston, TX 77235-5282	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 04/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simoneaux II, Jerry Wayne (Judge) Contributor address; City; State; Zip Code Houston, TX 77235-5282	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/79 Rpt: 65/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simoneaux II, Jerry Wayne (Judge) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77235-5282	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Harris County
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simoneaux II, Jerry Wayne (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77235-5282	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simoneaux II, Jerry Wayne (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77235-5282	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain Jr., Charles A. (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002-7017	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Justice		Employer (See Instructions) Court of Appeals Fourteenth District of Texas
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain Jr., Charles A. (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002-7017	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Justice		Employer (See Instructions) Court of Appeals Fourteenth District of Texas

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/79 Rpt: 66/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain Jr., Charles A. (Judge) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002-7017	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Justice		9 Employer (See Instructions) Court of Appeals Fourteenth District of Texas
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain Jr., Charles A. (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002-7017	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Justice		Employer (See Instructions) Court of Appeals Fourteenth District of Texas
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain Jr., Charles A. (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002-7017	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Justice		Employer (See Instructions) Court of Appeals Fourteenth District of Texas
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain Jr., Charles A. (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77002-7017	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Justice		Employer (See Instructions) Court of Appeals Fourteenth District of Texas
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spring Branch Democrats <hr/> Contributor address; City; State; Zip Code Houston, TX 77243-0854	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/79 Rpt: 67/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanley, Sheryl Caronia <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77057-3723	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Social Worker		9 Employer (See Instructions) United Healthcare
Date 02/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanley, Sheryl Caronia <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-3723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) United Healthcare
Date 03/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanley, Sheryl Caronia <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-3723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) United Healthcare
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanley, Sheryl Caronia <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-3723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) United Healthcare
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanley, Sheryl Caronia <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-3723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) United Healthcare

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/79 Rpt: 68/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 06/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanley, Sheryl Caronia <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77057-3723	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Social Worker		9 Employer (See Instructions) United Healthcare
Date 01/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) State Representative Christina Morales <hr/> Contributor address; City; State; Zip Code Houston, TX 77003-1624	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teare, Sean (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77266-6031	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Candidate		Employer (See Instructions) Sean Teare for District Attorney
Date 05/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Democratic Women Harris Metro <hr/> Contributor address; City; State; Zip Code Houston, TX 77009-1928	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Gulf Coast AFL-CIO Working People PAC <hr/> Contributor address; City; State; Zip Code Houston, TX 77023-5305	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/79 Rpt: 69/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Senfronia (Rep.) 6 Contributor address; City; State; Zip Code Houston, TX 77081-1246	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) lawyer		9 Employer (See Instructions) Self-Employed
Date 01/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tollefson, Linda Sindelar (Ms.) Contributor address; City; State; Zip Code Houston, TX 77096-4809	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tollefson, Linda Sindelar (Ms.) Contributor address; City; State; Zip Code Houston, TX 77096-4809	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tollefson, Linda Sindelar (Ms.) Contributor address; City; State; Zip Code Houston, TX 77096-4809	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tollefson, Linda Sindelar (Ms.) Contributor address; City; State; Zip Code Houston, TX 77096-4809	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/79 Rpt: 70/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tollefson, Linda Sindelar (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77096-4809	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tollefson, Linda Sindelar (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77096-4809	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Silvia R <hr/> Contributor address; City; State; Zip Code Houston, TX 77023-4523	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Elected - Harris County Constable Precinct 6		Employer (See Instructions) Harris County
Date 02/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Silvia R <hr/> Contributor address; City; State; Zip Code Houston, TX 77023-4523	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Elected - Harris County Constable Precinct 6		Employer (See Instructions) Harris County
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Silvia R <hr/> Contributor address; City; State; Zip Code Houston, TX 77023-4523	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Elected - Harris County Constable Precinct 6		Employer (See Instructions) Harris County

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/79 Rpt: 71/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 04/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Silvia R <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77023-4523	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Elected - Harris County Constable Precinct 6		9 Employer (See Instructions) Harris County
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Silvia R <hr/> Contributor address; City; State; Zip Code Houston, TX 77023-4523	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Elected - Harris County Constable Precinct 6		Employer (See Instructions) Harris County
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Silvia R <hr/> Contributor address; City; State; Zip Code Houston, TX 77023-4523	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Elected - Harris County Constable Precinct 6		Employer (See Instructions) Harris County
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Unger, Hilary (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77079-3170	Amount of Contribution (\$) \$77.64
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Texas
Date 01/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waldrop, Teresa J. (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77001-0226	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State Judiciary

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/79 Rpt: 72/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waldrop, Teresa J. (Judge) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77001-0226	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) State Judiciary
Date 02/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waldrop, Teresa J. (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77001-0226	Amount of Contribution (\$) \$35.62
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State Judiciary
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waldrop, Teresa J. (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77001-0226	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State Judiciary
Date 03/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waldrop, Teresa J. (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77001-0226	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State Judiciary
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waldrop, Teresa J. (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77001-0226	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State Judiciary

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/79 Rpt: 73/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waldrop, Teresa J. (Judge) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77001-0226	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) State Judiciary
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waldrop, Teresa J. (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77001-0226	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State Judiciary
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waldrop, Teresa J. (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77001-0226	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State Judiciary
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waldrop, Teresa J. (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77001-0226	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State Judiciary
Date 01/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Sedrick <hr/> Contributor address; City; State; Zip Code Houston, TX 77284-2495	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/79 Rpt: 74/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Sedrick 6 Contributor address; City; State; Zip Code Houston, TX 77284-2495	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Harris County
Date 03/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Sedrick Contributor address; City; State; Zip Code Houston, TX 77284-2495	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 04/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Sedrick Contributor address; City; State; Zip Code Houston, TX 77284-2495	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Sedrick Contributor address; City; State; Zip Code Houston, TX 77284-2495	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Sedrick Contributor address; City; State; Zip Code Houston, TX 77284-2495	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/79 Rpt: 75/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walle Jr., Armando Lucio (The Honorable) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77039-3713	7 Amount of Contribution (\$) \$517.75
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self-Employed
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walle Jr., Armando Lucio (The Honorable) <hr/> Contributor address; City; State; Zip Code Houston, TX 77039-3713	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 01/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Peter <hr/> Contributor address; City; State; Zip Code Houston, TX 77095-4454	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Geophysicist		Employer (See Instructions) GeoComputing Group LLC
Date 01/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Peter <hr/> Contributor address; City; State; Zip Code Houston, TX 77095-4454	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Geophysicist		Employer (See Instructions) GeoComputing Group LLC
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Peter <hr/> Contributor address; City; State; Zip Code Houston, TX 77095-4454	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Geophysicist		Employer (See Instructions) GeoComputing Group LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/79 Rpt: 76/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Peter <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77095-4454	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Geophysicist		9 Employer (See Instructions) GeoComputing Group LLC
Date 04/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Peter <hr/> Contributor address; City; State; Zip Code Houston, TX 77095-4454	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Geophysicist		Employer (See Instructions) GeoComputing Group LLC
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Peter <hr/> Contributor address; City; State; Zip Code Houston, TX 77095-4454	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Geophysicist		Employer (See Instructions) GeoComputing Group LLC
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Peter <hr/> Contributor address; City; State; Zip Code Houston, TX 77095-4454	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Geophysicist		Employer (See Instructions) GeoComputing Group LLC
Date 01/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward Johnson, Charlene (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77091-5601	Amount of Contribution (\$) \$517.75
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) NRG

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/79 Rpt: 77/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Fran J. 6 Contributor address; City; State; Zip Code Houston, TX 77035-4337	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Harris Ciunty
Date 02/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Fran J. Contributor address; City; State; Zip Code Houston, TX 77035-4337	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris Ciunty
Date 03/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Fran J. Contributor address; City; State; Zip Code Houston, TX 77035-4337	Amount of Contribution (\$) \$312.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris Ciunty
Date 03/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Fran J. Contributor address; City; State; Zip Code Houston, TX 77035-4337	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris Ciunty
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Fran J. Contributor address; City; State; Zip Code Houston, TX 77035-4337	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris Ciunty

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/79 Rpt: 78/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Fran J. <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77035-4337	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Harris County
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Fran J. <hr/> Contributor address; City; State; Zip Code Houston, TX 77035-4337	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 02/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weems, Christine Vinh (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-1141	Amount of Contribution (\$) \$517.75
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 03/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weems, Christine Vinh (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-1141	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weems, Christine Vinh (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-1141	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/79 Rpt: 79/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weems, Christine Vinh (Judge) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77004-1141	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) State of Texas
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weems, Christine Vinh (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-1141	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 01/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Elizabeth <hr/> Contributor address; City; State; Zip Code Alamogordo, NM 88310-6413	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Elizabeth <hr/> Contributor address; City; State; Zip Code Alamogordo, NM 88310-6413	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Elizabeth <hr/> Contributor address; City; State; Zip Code Alamogordo, NM 88310-6413	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/79 Rpt: 80/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 04/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Alamogordo, NM 88310-6413	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Elizabeth <hr/> Contributor address; City; State; Zip Code Alamogordo, NM 88310-6413	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Elizabeth <hr/> Contributor address; City; State; Zip Code Alamogordo, NM 88310-6413	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, LaShawn (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77098-1403	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 01/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wu, Gene Yuanzhi (Rep.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77081-6624	Amount of Contribution (\$) \$2,065.20
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Gene Wu PC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/79 Rpt: 81/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 06/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wu, Gene Yuanzhi (Rep.) 6 Contributor address; City; State; Zip Code Houston, TX 77081-6624	7 Amount of Contribution (\$) \$2,000.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Gene Wu PC
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyatt, Carla L (Dr.) Contributor address; City; State; Zip Code Houston, TX 77021-2836	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Harris County Treasurer		Employer (See Instructions) Harris County
Date 03/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyatt, Carla L (Dr.) Contributor address; City; State; Zip Code Houston, TX 77021-2836	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Harris County Treasurer		Employer (See Instructions) Harris County
Date 04/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyatt, Carla L (Dr.) Contributor address; City; State; Zip Code Houston, TX 77021-2836	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Harris County Treasurer		Employer (See Instructions) Harris County
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyatt, Carla L (Dr.) Contributor address; City; State; Zip Code Houston, TX 77021-2836	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Harris County Treasurer		Employer (See Instructions) Harris County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/79 Rpt: 82/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 06/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyatt, Carla L (Dr.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77021-2836	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Harris County Treasurer		9 Employer (See Instructions) Harris County
Date 01/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) singh, manpreet (The Honorable) <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401-5716	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris county
Date 01/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) singh, manpreet (The Honorable) <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401-5716	Amount of Contribution (\$) \$51.83
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris county
Date 02/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) singh, manpreet (The Honorable) <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401-5716	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris county
Date 03/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) singh, manpreet (The Honorable) <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401-5716	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris county

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/79 Rpt: 83/151
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) singh, manpreet (The Honorable) 6 Contributor address; City; State; Zip Code Bellaire, TX 77401-5716	7 Amount of Contribution (\$) \$322.34
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Harris county
Date 04/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) singh, manpreet (The Honorable) Contributor address; City; State; Zip Code Bellaire, TX 77401-5716	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris county
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) singh, manpreet (The Honorable) Contributor address; City; State; Zip Code Bellaire, TX 77401-5716	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris county
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) singh, manpreet (The Honorable) Contributor address; City; State; Zip Code Bellaire, TX 77401-5716	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris county

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: Sch: 1/2 Rpt: 84/151	
2 FILER NAME Harris County Democratic Party (CEC)				3 Filer ID (Ethics Commission Filers) 00015507	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 01/16/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Michael Patrick <hr/> 7 Contributor address; City; State; Zip Code Houston, TX 77005		8 Amount of contribution (\$) \$237.74	9 In-kind contribution description Loan Interest	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Lawyer			11 Employer (FOR NON-JUDICIAL) (See instructions) Doyle Dennis Avery LLP		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL) (See instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 02/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Michael Patrick <hr/> Contributor address; City; State; Zip Code Houston, TX 77005		Amount of contribution (\$) \$254.13	In-kind contribution description Loan Interest	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Lawyer			Employer (FOR NON-JUDICIAL) (See instructions) Doyle Dennis Avery LLP		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 03/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Michael Patrick <hr/> Contributor address; City; State; Zip Code Houston, TX 77005		Amount of contribution (\$) \$304.63	In-kind contribution description Loan Interest	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Lawyer			Employer (FOR NON-JUDICIAL) (See instructions) Doyle Dennis Avery LLP		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/2 Rpt: 85/151	
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 04/11/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Michael Patrick	8 Amount of contribution (\$) \$340.36	9 In-kind contribution description Loan Interest
	7 Contributor address; City; State; Zip Code Houston, TX 77005		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Lawyer		11 Employer (FOR NON-JUDICIAL) (See instructions) Doyle Dennis Avery LLP	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Michael Patrick	Amount of contribution (\$) \$329.37	In-kind contribution description Loan Interest
	Contributor address; City; State; Zip Code Houston, TX 77005		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Lawyer		Employer (FOR NON-JUDICIAL) (See instructions) Doyle Dennis Avery LLP	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Michael Patrick	Amount of contribution (\$) \$274.48	In-kind contribution description Loan Interest
	Contributor address; City; State; Zip Code Houston, TX 77005		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Lawyer		Employer (FOR NON-JUDICIAL) (See instructions) Doyle Dennis Avery LLP	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 86/151	
2 FILER NAME Harris County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00015507	
4 TOTAL OF UNITEMIZED LOANS			\$
5 Date of loan 02/11/2025	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Frost Bank		9 Loan Amount (\$) \$19,000.00
6 Is lender a financial institution? Yes	8 Lender address; City; State; Zip Code San Antonio, TX 78205		10 Interest Rate 5.27
			11 Maturity Date 12/05/2025
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)	
14 Description of Collateral <input type="checkbox"/> None Personal Funds of Michael Doyle, Party Chair		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/> N/A	
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor Doyle, Michael		19 Amount Guaranteed (\$) \$19,000.00
	18 Guarantor address; City; State; Zip Code Houston, TX 77019		
20 Principal occupation Lawyer		21 Employer (See Instructions) Doyle Dennis Avery LLP	
Date of loan 06/11/2025	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Frost Bank		Loan Amount (\$) \$56,000.00
Is lender a financial institution? Yes	Lender address; City; State; Zip Code San Antonio, TX 78205		Interest Rate 5.27
			Maturity Date 12/05/2025
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Description of Collateral <input type="checkbox"/> None Personal Funds of Michael Doyle, Party Chair		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/> N/A	
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor Doyle, Michael		Amount Guaranteed (\$) \$56,000.00
	Guarantor address; City; State; Zip Code Houston, TX 77019		
Principal occupation Lawyer		Employer (See Instructions) Doyle Dennis Avery LLP	

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: 1/64 Rpt: 87/151	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/20/2025	5 Payee name 8x8 Inc.	
6 Amount (\$) \$321.61	7 Payee address; City; State; Zip Code 2125 Onel Dr San Jose, CA 95131-2032	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Administrative Telephone - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name 8x8 Inc.	
Amount (\$) \$321.61	Payee address; City; State; Zip Code 2125 Onel Dr San Jose, CA 95131-2032	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Administrative Telephone Services - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/25/2025	Payee name 8x8 Inc.	
Amount (\$) \$321.61	Payee address; City; State; Zip Code 2125 Onel Dr San Jose, CA 95131-2032	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Administrative Telephone Services - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/64 Rpt: 88/151	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/05/2025	5 Payee name ActBlue Technical Services	
6 Amount (\$) \$2.18	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/12/2025	Payee name ActBlue Technical Services	
Amount (\$) \$1.79	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/19/2025	Payee name ActBlue Technical Services	
Amount (\$) \$0.52	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing 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: 3/64 Rpt: 89/151	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/26/2025	5 Payee name ActBlue Technical Services	
6 Amount (\$) \$1.99	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/02/2025	Payee name ActBlue Technical Services	
Amount (\$) \$0.80	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/09/2025	Payee name ActBlue Technical Services	
Amount (\$) \$3.57	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing 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: 4/64 Rpt: 90/151	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/16/2025	5 Payee name ActBlue Technical Services	
6 Amount (\$) \$0.48	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/23/2025	Payee name ActBlue Technical Services	
Amount (\$) \$10.79	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/02/2025	Payee name ActBlue Technical Services	
Amount (\$) \$1.68	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing 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: 5/64 Rpt: 91/151	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/09/2025	5 Payee name ActBlue Technical Services	
6 Amount (\$) \$3.17	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/16/2025	Payee name ActBlue Technical Services	
Amount (\$) \$0.40	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/23/2025	Payee name ActBlue Technical Services	
Amount (\$) \$0.91	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing 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: 6/64 Rpt: 92/151	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/30/2025	5 Payee name ActBlue Technical Services	
6 Amount (\$) \$1.88	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/31/2025	Payee name ActBlue Technical Services	
Amount (\$) \$20.15	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/06/2025	Payee name ActBlue Technical Services	
Amount (\$) \$1.78	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing 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: 7/64 Rpt: 93/151	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 04/13/2025	5 Payee name ActBlue Technical Services	
6 Amount (\$) \$1.79	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/20/2025	Payee name ActBlue Technical Services	
Amount (\$) \$0.79	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/27/2025	Payee name ActBlue Technical Services	
Amount (\$) \$1.60	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing 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: 8/64 Rpt: 94/151	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/04/2025	5 Payee name ActBlue Technical Services	
6 Amount (\$) \$1.79	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/11/2025	Payee name ActBlue Technical Services	
Amount (\$) \$2.58	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/18/2025	Payee name ActBlue Technical Services	
Amount (\$) \$3.95	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing 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: 9/64 Rpt: 95/151	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/25/2025	5 Payee name ActBlue Technical Services	
6 Amount (\$) \$1.11	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2025	Payee name ActBlue Technical Services	
Amount (\$) \$2.08	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/08/2025	Payee name ActBlue Technical Services	
Amount (\$) \$1.78	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing 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: 10/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 06/15/2025	5 Payee name ActBlue Technical Services	
6 Amount (\$) \$1.79	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/22/2025	Payee name ActBlue Technical Services	
Amount (\$) \$0.79	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/29/2025	Payee name ActBlue Technical Services	
Amount (\$) \$2.00	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing 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: 11/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 06/30/2025	5 Payee name ActBlue Technical Services	
6 Amount (\$) \$0.40	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Adobe Systems Incorporated	
Amount (\$) \$17.10	Payee address; City; State; Zip Code 345 Park Ave San Jose, CA 95110-2704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Adobe Systems Incorporated	
Amount (\$) \$17.10	Payee address; City; State; Zip Code 345 Park Ave San Jose, CA 95110-2704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software - Federal Reimbursement
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: 12/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/31/2025	5 Payee name Alas, Roberto	
6 Amount (\$) \$1,654.02	7 Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2025	Payee name Alas, Roberto	
Amount (\$) \$1,336.63	Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/27/2025	Payee name Alvarado, Yolanda	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 6669 Fairfield St Houston, TX 77023	
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 Convention Expenses
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/28/2025	5 Payee name Amalgamated Bank	
6 Amount (\$) \$26.09	7 Payee address; City; State; Zip Code 275 7th Ave New York, NY 10001-6708	
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 Bank Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/26/2025	Candidate/Officeholder name Payee name Amalgamated Bank	
Amount (\$) \$8.47	Payee address; City; State; Zip Code 275 7th Ave New York, NY 10001-6708	
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 Bank Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/27/2025	Candidate/Officeholder name Payee name Amalgamated Bank	
Amount (\$) \$26.47	Payee address; City; State; Zip Code 275 7th Ave New York, NY 10001-6708	
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 Bank Fee
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: 14/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 04/25/2025	5 Payee name Amalgamated Bank	
6 Amount (\$) \$25.21	7 Payee address; City; State; Zip Code 275 7th Ave New York, NY 10001-6708	
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 Bank Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/29/2025	Payee name Amalgamated Bank	
Amount (\$) \$26.89	Payee address; City; State; Zip Code 275 7th Ave New York, NY 10001-6708	
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 Bank Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/27/2025	Payee name Amalgamated Bank	
Amount (\$) \$25.63	Payee address; City; State; Zip Code 275 7th Ave New York, NY 10001-6708	
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 Bank Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/20/2025	5 Payee name Amalgamated Bank	
6 Amount (\$) \$33.58	7 Payee address; City; State; Zip Code 275 7th Ave New York, NY 10001-6708	
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 Bank Fees - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Amalgamated Bank	
Amount (\$) \$10.24	Payee address; City; State; Zip Code 275 7th Ave New York, NY 10001-6708	
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 Bank Fees - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/25/2025	Payee name Amalgamated Bank	
Amount (\$) \$7.45	Payee address; City; State; Zip Code 275 7th Ave New York, NY 10001-6708	
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 Bank Fee - Federal Reimbursement
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: 16/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/27/2025	5 Payee name Amalgamated Bank	
6 Amount (\$) \$6.62	7 Payee address; City; State; Zip Code 275 7th Ave New York, NY 10001-6708	
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 Bank Fees - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name AppFolio Inc.	
Amount (\$) \$1.97	Payee address; City; State; Zip Code 70 Castilian Dr Santa Barbara, CA 93117-3027	
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 Payment Processing Fees - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name AppFolio Inc.	
Amount (\$) \$1.97	Payee address; City; State; Zip Code 70 Castilian Dr Santa Barbara, CA 93117-3027	
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 Payment Processing Fees - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/25/2025	5 Payee name BakerRipley	
6 Amount (\$) \$1,185.00	7 Payee address; City; State; Zip Code 4410 Navigation Blvd Houston, TX 77011-1036	
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 Meeting Space Rental - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2025	Payee name Bee Compliance LLC	
Amount (\$) \$2,012.46	Payee address; City; State; Zip Code 611 Pennsylvania Ave SE # 192 Washington, DC 20003-4303	
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 Compliance Consulting - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Bee Compliance LLC	
Amount (\$) \$2,370.00	Payee address; City; State; Zip Code 611 Pennsylvania Ave SE # 192 Washington, DC 20003-4303	
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 Compliance Consulting - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/27/2025	5 Payee name Bee Compliance LLC	
6 Amount (\$) \$2,363.15	7 Payee address; City; State; Zip Code 611 Pennsylvania Ave SE # 192 Washington, DC 20003-4303	
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 Compliance Consulting - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2025	Payee name Bee Compliance LLC	
Amount (\$) \$2,370.00	Payee address; City; State; Zip Code 611 Pennsylvania Ave SE # 192 Washington, DC 20003-4303	
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 Compliance Consulting - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2025	Payee name Berlin Rosen LLC	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Democrat, Candidates/Officeholders	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/28/2025	5 Payee name Berlin Rosen LLC	
6 Amount (\$) \$4,000.00	7 Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Democratic, Candidates/Officeholders	Office sought Office held
Date 04/18/2025	Payee name Berlin Rosen LLC	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Democratic, Candidates/Officeholders	Office sought Office held
Date 05/21/2025	Payee name Berlin Rosen LLC	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Democratic, Candidates/Officeholders	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 06/25/2025	5 Payee name Berlin Rosen LLC	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Democratic, Candidates/Officeholders	Office sought Office held
Date 02/21/2025	Payee name Berlin Rosen LLC	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Democratic, Candidates/Officeholders	Office sought Office held
Date 01/31/2025	Payee name Campbell, Baird	
Amount (\$) \$1,781.24	Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 21/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/31/2025	5 Payee name Campbell, Baird	
6 Amount (\$) \$1,781.23	7 Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Campbell, Baird	
Amount (\$) \$4.74	Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/28/2025	Payee name Campbell, Baird	
Amount (\$) \$1,781.23	Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/27/2025	5 Payee name Campbell, Baird	
6 Amount (\$) \$1,781.23	7 Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/25/2025	Payee name Canva.coca	
Amount (\$) \$94.33	Payee address; City; State; Zip Code 3212 E Cesar Chavez St Building 1 Austin, TX 78702-4938	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Carter & Hatcher Consulting LLC	
Amount (\$) \$69.13	Payee address; City; State; Zip Code 1015 Herkimer St Houston, TX 77008-6743	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bookkeeping Services - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 23/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/28/2025	5 Payee name Carter & Hatcher Consulting LLC	
6 Amount (\$) \$211.13	7 Payee address; City; State; Zip Code 1015 Herkimer St Houston, TX 77008-6743	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bookkeeping Services - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/25/2025	Payee name Carter & Hatcher Consulting LLC	
Amount (\$) \$110.60	Payee address; City; State; Zip Code 1015 Herkimer St Houston, TX 77008-6743	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bookkeeping Services - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/25/2025	Payee name Carter & Hatcher Consulting LLC	
Amount (\$) \$1.00	Payee address; City; State; Zip Code 1015 Herkimer St Houston, TX 77008-6743	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 24/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/27/2025	5 Payee name Carter & Hatcher Consulting LLC	
6 Amount (\$) \$88.88	7 Payee address; City; State; Zip Code 1015 Herkimer St Houston, TX 77008-6743	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bookkeeping Services - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Comcast Cable	
Amount (\$) \$86.10	Payee address; City; State; Zip Code PO Box 660618 Dallas, TX 75266-0618	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Comcast Cable	
Amount (\$) \$13.63	Payee address; City; State; Zip Code PO Box 660618 Dallas, TX 75266-0618	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 25/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/20/2025	5 Payee name Comcast Cable	
6 Amount (\$) \$195.37	7 Payee address; City; State; Zip Code PO Box 660618 Dallas, TX 75266-0618	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/28/2025	Payee name Comcast Cable	
Amount (\$) \$13.64	Payee address; City; State; Zip Code PO Box 660618 Dallas, TX 75266-0618	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/25/2025	Payee name Comcast Cable	
Amount (\$) \$35.16	Payee address; City; State; Zip Code PO Box 660618 Dallas, TX 75266-0618	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet - Federal Reimbursement
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: 26/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/31/2025	5 Payee name Concept Neighborhood	
6 Amount (\$) \$4,937.49	7 Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Rent - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/20/2025	Candidate/Officeholder name Office sought Office held	
Payee name EasyDMARC		
Amount (\$) \$75.78	Payee address; City; State; Zip Code 8 The Grn Dover, DE 19901-3618	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/20/2025	Candidate/Officeholder name Office sought Office held	
Payee name EasyDMARC		
Amount (\$) \$75.78	Payee address; City; State; Zip Code 8 The Grn Dover, DE 19901-3618	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software - Federal Reimbursement
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: 27/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/31/2025	5 Payee name Financial Innovations Inc.	
6 Amount (\$) \$281.31	7 Payee address; City; State; Zip Code 1 Weingeroff Blvd Cranston, RI 02910-4009	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Party Merchandise - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Financial Innovations Inc.	
Amount (\$) \$251.69	Payee address; City; State; Zip Code 1 Weingeroff Blvd Cranston, RI 02910-4009	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Party Merchandise - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Financial Innovations Inc.	
Amount (\$) \$496.65	Payee address; City; State; Zip Code 1 Weingeroff Blvd Cranston, RI 02910-4009	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Party Merchandise - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 28/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/20/2025	5 Payee name First Data Merchant Services	
6 Amount (\$) \$308.61	7 Payee address; City; State; Zip Code 1307 Walt Whitman Rd Melville, NY 11747-3011	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name First Data Merchant Services	
Amount (\$) \$155.79	Payee address; City; State; Zip Code 1307 Walt Whitman Rd Melville, NY 11747-3011	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name First Data Merchant Services	
Amount (\$) \$2.77	Payee address; City; State; Zip Code 1307 Walt Whitman Rd Melville, NY 11747-3011	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 29/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/20/2025	5 Payee name First Data Merchant Services	
6 Amount (\$) \$1,102.06	7 Payee address; City; State; Zip Code 1307 Walt Whitman Rd Melville, NY 11747-3011	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/10/2025	Payee name Frost Bank	
Amount (\$) \$56,000.00	Payee address; City; State; Zip Code 111 W Houston St San Antonio, TX 78205	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Loan Maturity Date Extended. See Loan Schedule for updated information.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/06/2025	Payee name Gill, Flora	
Amount (\$) \$136.27	Payee address; City; State; Zip Code 15238 Stradbrook Dr Houston, TX 77062-3219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 30/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/28/2025	5 Payee name Godaddy.com	
6 Amount (\$) \$68.07	7 Payee address; City; State; Zip Code 14455 N Hayden Rd Ste 226 Scottsdale, AZ 85260-6993	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain Name - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/28/2025	Payee name Godaddy.com	
Amount (\$) \$93.74	Payee address; City; State; Zip Code 14455 N Hayden Rd Ste 226 Scottsdale, AZ 85260-6993	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/25/2025	Payee name Godaddy.com	
Amount (\$) \$202.79	Payee address; City; State; Zip Code 14455 N Hayden Rd Ste 226 Scottsdale, AZ 85260-6993	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 31/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/27/2025	5 Payee name Goodman Campaigns LLC	
6 Amount (\$) \$395.00	7 Payee address; City; State; Zip Code 211 E 7th St Ste 620 Austin, TX 78701-3218	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Digital Acquisition - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Google	
Amount (\$) \$337.98	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Services - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Google	
Amount (\$) \$442.43	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Services - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 32/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/28/2025	5 Payee name Google	
6 Amount (\$) \$254.66	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Services - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/31/2025	Candidate/Officeholder name Office sought Office held	
Payee name Great America Financial Services		
Amount (\$) \$281.74	Payee address; City; State; Zip Code PO Box 660831 Dallas, TX 75266-0831	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Copier Lease - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/20/2025	Candidate/Officeholder name Office sought Office held	
Payee name Great America Financial Services		
Amount (\$) \$256.13	Payee address; City; State; Zip Code PO Box 660831 Dallas, TX 75266-0831	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Copier Lease - Federal Reimbursement
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: 33/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/27/2025	5 Payee name Great America Financial Services	
6 Amount (\$) \$256.13	7 Payee address; City; State; Zip Code PO Box 660831 Dallas, TX 75266-0831	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Copier Lease - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2025	Payee name Great America Financial Services	
Amount (\$) \$256.13	Payee address; City; State; Zip Code PO Box 660831 Dallas, TX 75266-0831	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Copier Lease - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2025	Payee name Gusto	
Amount (\$) \$2,928.03	Payee address; City; State; Zip Code 525 2nd St San Francisco, CA 94107-1403	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 34/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/20/2025	5 Payee name Gusto	
6 Amount (\$) \$148.68	7 Payee address; City; State; Zip Code 525 2nd St San Francisco, CA 94107-1403	
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 Payroll Processing Fees - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Gusto	
Amount (\$) \$178.52	Payee address; City; State; Zip Code 525 2nd St San Francisco, CA 94107-1403	
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 Payroll Processing Fees - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Gusto	
Amount (\$) \$410.02	Payee address; City; State; Zip Code 525 2nd St San Francisco, CA 94107-1403	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 35/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/20/2025	5 Payee name Gusto	
6 Amount (\$) \$527.44	7 Payee address; City; State; Zip Code 525 2nd St San Francisco, CA 94107-1403	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Gusto	
Amount (\$) \$3,146.99	Payee address; City; State; Zip Code 525 2nd St San Francisco, CA 94107-1403	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Gusto	
Amount (\$) \$138.34	Payee address; City; State; Zip Code 525 2nd St San Francisco, CA 94107-1403	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
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: 36/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/28/2025	5 Payee name Gusto	
6 Amount (\$) \$477.51	7 Payee address; City; State; Zip Code 525 2nd St San Francisco, CA 94107-1403	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/28/2025	Payee name Gusto	
Amount (\$) \$134.82	Payee address; City; State; Zip Code 525 2nd St San Francisco, CA 94107-1403	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/25/2025	Payee name Gusto	
Amount (\$) \$128.00	Payee address; City; State; Zip Code 525 2nd St San Francisco, CA 94107-1403	
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 Payroll Processing Fees - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 37/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/20/2025	5 Payee name Health Care Services Corporation	
6 Amount (\$) \$761.13	7 Payee address; City; State; Zip Code PO Box 731428 Dallas, TX 75373-1428	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Health Care Payments - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/28/2025	Payee name Health Care Services Corporation	
Amount (\$) \$750.27	Payee address; City; State; Zip Code PO Box 731428 Dallas, TX 75373-1428	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Health Care Payments - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/27/2025	Payee name Health Care Services Corporation	
Amount (\$) \$761.13	Payee address; City; State; Zip Code PO Box 731428 Dallas, TX 75373-1428	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Health Care Payments - Federal Reimbursement
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: 38/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 06/25/2025	5 Payee name Hilton Americas Hotel	
6 Amount (\$) \$3,550.00	7 Payee address; City; State; Zip Code 1600 Lamar St Houston, TX 77010-5012	
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 Space Rental and Catering - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2025	Payee name Hilton Americas Hotel	
Amount (\$) \$7,088.09	Payee address; City; State; Zip Code 1600 Lamar St Houston, TX 77010-5012	
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 Space Rental and Catering - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name IKEA	
Amount (\$) \$3.40	Payee address; City; State; Zip Code 7810 Katy Fwy Houston, TX 77024-2006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Equipment - Federal Reimbursement
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: 39/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/20/2025	5 Payee name IKEA	
6 Amount (\$) \$581.49	7 Payee address; City; State; Zip Code 7810 Katy Fwy Houston, TX 77024-2006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Equipment - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Intuit	
Amount (\$) \$66.70	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting Software - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Intuit	
Amount (\$) \$66.70	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting Software - Federal Reimbursement
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: 40/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/25/2025	5 Payee name Intuit	
6 Amount (\$) \$66.70	7 Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting Software - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/27/2025	Payee name Intuit	
Amount (\$) \$66.70	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting Software - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2025	Payee name J&N Enterprises	
Amount (\$) \$172.29	Payee address; City; State; Zip Code 2519 Fairway Park Dr Ste 302 Houston, TX 77092-7600	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Printing - Federal Reimbursement
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: 41/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/31/2025	5 Payee name Malacoff, Marc Lowell	
6 Amount (\$) \$547.18	7 Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2025	Payee name Malacoff, Marc Lowell	
Amount (\$) \$547.17	Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2025	Payee name Morningstar Storage	
Amount (\$) \$163.45	Payee address; City; State; Zip Code 812 Live Oak St Houston, TX 77003-3221	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Storage - Federal Reimbursement
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: 42/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/20/2025	5 Payee name Morningstar Storage	
6 Amount (\$) \$221.99	7 Payee address; City; State; Zip Code 812 Live Oak St Houston, TX 77003-3221	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Storage - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/25/2025	Payee name Morningstar Storage	
Amount (\$) \$221.99	Payee address; City; State; Zip Code 812 Live Oak St Houston, TX 77003-3221	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Storage - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name NGP VAN	
Amount (\$) \$179.37	Payee address; City; State; Zip Code 1445 New York Ave NW FI 2 Washington, DC 20005-2134	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software - Federal Reimbursement
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: 43/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/25/2025	5 Payee name NGP VAN	
6 Amount (\$) \$2,172.11	7 Payee address; City; State; Zip Code 1445 New York Ave NW FI 2 Washington, DC 20005-2134	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Neon One LLC	
Amount (\$) \$99.14	Payee address; City; State; Zip Code 4545 N Ravenswood Ave Chicago, IL 60640-5201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Neon One LLC	
Amount (\$) \$99.14	Payee address; City; State; Zip Code 4545 N Ravenswood Ave Chicago, IL 60640-5201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software - Federal Reimbursement
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: 44/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/25/2025	5 Payee name Neon One LLC	
6 Amount (\$) \$99.14	7 Payee address; City; State; Zip Code 4545 N Ravenswood Ave Chicago, IL 60640-5201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Network Solutions	
Amount (\$) \$45.01	Payee address; City; State; Zip Code 13861 Sunrise Valley Dr Ste 300 Herndon, VA 20171-6126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain Name - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Network Solutions	
Amount (\$) \$36.33	Payee address; City; State; Zip Code 13861 Sunrise Valley Dr Ste 300 Herndon, VA 20171-6126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain Name - Federal Reimbursement
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: 45/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/20/2025	5 Payee name Network Solutions	
6 Amount (\$) \$45.16	7 Payee address; City; State; Zip Code 13861 Sunrise Valley Dr Ste 300 Herndon, VA 20171-6126	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain Name - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Network Solutions	
Amount (\$) \$42.64	Payee address; City; State; Zip Code 13861 Sunrise Valley Dr Ste 300 Herndon, VA 20171-6126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain Name - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Pantheon	
Amount (\$) \$46.32	Payee address; City; State; Zip Code 717 California St San Francisco, CA 94108-2455	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting - Federal Reimbursement
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: 46/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/02/2025	5 Payee name Paragon Payment Solutions	
6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/03/2025	Candidate/Officeholder name Office sought Office held	
Payee name Paragon Payment Solutions		
Amount (\$) \$25.00	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/03/2025	Candidate/Officeholder name Office sought Office held	
Payee name Paragon Payment Solutions		
Amount (\$) \$25.00	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing 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: 47/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 04/02/2025	5 Payee name Paragon Payment Solutions	
6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/02/2025	Payee name Paragon Payment Solutions	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/02/2025	Payee name Paragon Payment Solutions	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing 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: 48/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/31/2025	5 Payee name Parra Design Group LTD	
6 Amount (\$) \$4,336.00	7 Payee address; City; State; Zip Code 4619 Lyons Ave Houston, TX 77020-4304	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Rent - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Parra Design Group LTD	
Amount (\$) \$4,345.00	Payee address; City; State; Zip Code 4619 Lyons Ave Houston, TX 77020-4304	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Rent - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2025	Payee name Pedersen, Nicole Biguenet	
Amount (\$) \$1,521.77	Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll - Federal Reimbursement
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: 49/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/31/2025	5 Payee name Pedersen, Nicole Biguenet	
6 Amount (\$) \$2,038.49	7 Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/28/2025	Payee name Pedersen, Nicole Biguenet	
Amount (\$) \$1,521.78	Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/27/2025	Payee name Pedersen, Nicole Biguenet	
Amount (\$) \$1,521.78	Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll - Federal Reimbursement
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: 50/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/31/2025	5 Payee name Rogers, Corisha Michelle	
6 Amount (\$) \$1,654.02	7 Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2025	Payee name Rogers, Corisha Michelle	
Amount (\$) \$1,654.02	Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Rogers, Corisha Michelle	
Amount (\$) \$18.17	Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking - Federal Reimbursement
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: 51/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/28/2025	5 Payee name Rogers, Corisha Michelle	
6 Amount (\$) \$1,654.02	7 Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/27/2025	Payee name Rogers, Corisha Michelle	
Amount (\$) \$1,654.02	Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2025	Payee name Rojas, Madeline	
Amount (\$) \$2,038.49	Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll - Federal Reimbursement
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: 52/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 01/31/2025	5 Payee name Rojas, Madeline	
6 Amount (\$) \$1,521.78	7 Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Rojas, Madeline	
Amount (\$) \$120.26	Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Administrative Catering - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/28/2025	Payee name Rojas, Madeline	
Amount (\$) \$2,038.49	Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll - Federal Reimbursement
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: 53/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 05/27/2025	5 Payee name Rojas, Madeline	
6 Amount (\$) \$2,038.49	7 Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2025	Payee name Scale to Win LLC	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 13742 Harper St Santa Ana, CA 92703-1419	
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 Phone Services - State Activity
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2025	Payee name Senate District 13	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 3813 Gertin St Houston, TX 77004-6503	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
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: 54/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 04/30/2025	5 Payee name Senate District 13	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 3813 Gertin St Houston, TX 77004-6503	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Shepard Connection	
Amount (\$) \$790.00	Payee address; City; State; Zip Code 1022 Saulnier St Houston, TX 77019-4732	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Consulting - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Shepard Connection	
Amount (\$) \$790.00	Payee address; City; State; Zip Code 1022 Saulnier St Houston, TX 77019-4732	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Consulting - Federal Reimbursement
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: 55/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/20/2025	5 Payee name Shopify	
6 Amount (\$) \$1.17	7 Payee address; City; State; Zip Code 33 New Montgomery St Ste 750 San Francisco, CA 94105-4537	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Shopify	
Amount (\$) \$88.42	Payee address; City; State; Zip Code 33 New Montgomery St Ste 750 San Francisco, CA 94105-4537	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Shopify	
Amount (\$) \$1.00	Payee address; City; State; Zip Code 33 New Montgomery St Ste 750 San Francisco, CA 94105-4537	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
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: 56/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/20/2025	5 Payee name Shopify	
6 Amount (\$) \$88.42	7 Payee address; City; State; Zip Code 33 New Montgomery St Ste 750 San Francisco, CA 94105-4537	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Shopify	
Amount (\$) \$1.16	Payee address; City; State; Zip Code 33 New Montgomery St Ste 750 San Francisco, CA 94105-4537	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Shopify	
Amount (\$) \$1.00	Payee address; City; State; Zip Code 33 New Montgomery St Ste 750 San Francisco, CA 94105-4537	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
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: 57/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/28/2025	5 Payee name Shopify	
6 Amount (\$) \$0.64	7 Payee address; City; State; Zip Code 33 New Montgomery St Ste 750 San Francisco, CA 94105-4537	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
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 Shopify		
Amount (\$) \$1.71	Payee address; City; State; Zip Code 33 New Montgomery St Ste 750 San Francisco, CA 94105-4537	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/25/2025	Candidate/Officeholder name Office sought Office held	
Payee name Shopify		
Amount (\$) \$1.30	Payee address; City; State; Zip Code 33 New Montgomery St Ste 750 San Francisco, CA 94105-4537	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/25/2025	Candidate/Officeholder name Office sought Office held	
Payee name Shopify		
Amount (\$) \$1.30	Payee address; City; State; Zip Code 33 New Montgomery St Ste 750 San Francisco, CA 94105-4537	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
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: 58/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/25/2025	5 Payee name Shopify	
6 Amount (\$) \$88.42	7 Payee address; City; State; Zip Code 33 New Montgomery St Ste 750 San Francisco, CA 94105-4537	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/25/2025	Payee name Shopify	
Amount (\$) \$2.82	Payee address; City; State; Zip Code 33 New Montgomery St Ste 750 San Francisco, CA 94105-4537	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/25/2025	Payee name Shopify	
Amount (\$) \$2.65	Payee address; City; State; Zip Code 33 New Montgomery St Ste 750 San Francisco, CA 94105-4537	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
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: 59/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/25/2025	5 Payee name Shopify	
6 Amount (\$) \$1.71	7 Payee address; City; State; Zip Code 33 New Montgomery St Ste 750 San Francisco, CA 94105-4537	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/27/2025	Payee name Shopify	
Amount (\$) \$0.34	Payee address; City; State; Zip Code 33 New Montgomery St Ste 750 San Francisco, CA 94105-4537	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fees - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/30/2025	Payee name SouthCross Security	
Amount (\$) \$12.90	Payee address; City; State; Zip Code PO Box 742145 Houston, TX 77274-2145	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Alarm System
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: 60/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/20/2025	5 Payee name SouthCross Security	
6 Amount (\$) \$38.44	7 Payee address; City; State; Zip Code PO Box 742145 Houston, TX 77274-2145	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Alarm System - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Strong Strategies	
Amount (\$) \$5,332.50	Payee address; City; State; Zip Code 5050 Woodway Dr Houston, TX 77056-1763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Consulting - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Switchboard Public Benefit Corp	
Amount (\$) \$187.56	Payee address; City; State; Zip Code PO Box 33485 Washington, DC 20033-0485	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Texting - Federal Reimbursement
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: 61/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/20/2025	5 Payee name Switchboard Public Benefit Corp	
6 Amount (\$) \$191.72	7 Payee address; City; State; Zip Code PO Box 33485 Washington, DC 20033-0485	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Texting - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/25/2025	Payee name Switchboard Public Benefit Corp	
Amount (\$) \$440.81	Payee address; City; State; Zip Code PO Box 33485 Washington, DC 20033-0485	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Texting - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2025	Payee name Switchboard Public Benefit Corp	
Amount (\$) \$303.49	Payee address; City; State; Zip Code PO Box 33485 Washington, DC 20033-0485	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Texting - Federal Reimbursement
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: 62/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 03/13/2025	5 Payee name Texas Ethics Commission	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 201 E 14th St Austin, TX 78701-1445	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Filing Penalty	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Penalty
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/01/2025	Payee name Texas Majority PAC	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 611 Pennsylvania Ave SE #192 Washington, DC 20003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Refund	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution Refund
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/25/2025	Payee name Verbi Software	
Amount (\$) \$314.70	Payee address; City; State; Zip Code Invalidenstrabe 74 Berlin 10557 Germany	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Data Services - Federal Reimbursement
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: 63/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/20/2025	5 Payee name Wayfair	
6 Amount (\$) \$38.47	7 Payee address; City; State; Zip Code 4 Copley Pl Boston, MA 02116-6504	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Equipment - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Zoom.US	
Amount (\$) \$66.53	Payee address; City; State; Zip Code 55 Almaden Blvd FI 6 San Jose, CA 95113-1608	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Videoconferencing Software - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Zoom.US	
Amount (\$) \$66.53	Payee address; City; State; Zip Code 55 Almaden Blvd FI 6 San Jose, CA 95113-1608	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Videoconferencing Software - Federal Reimbursement
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: 64/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
4 Date 02/20/2025	5 Payee name Zoom.US	
6 Amount (\$) \$19.32	7 Payee address; City; State; Zip Code 55 Almaden Blvd FI 6 San Jose, CA 95113-1608	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Videoconferencing Software - Federal Reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/27/2025	Payee name Zoom.US	
Amount (\$) \$66.53	Payee address; City; State; Zip Code 55 Almaden Blvd FI 6 San Jose, CA 95113-1608	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Videoconferencing Software - Federal Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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 F2: Sch: 1/1 Rpt: 151/151	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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5 Date 06/30/2025	6 Payee name Berlin Rosen LLC
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7 Amount (\$) \$22,014.28	8 Payee address; City; State; Zip Code 15 Maiden Ln Ste 1600 New York, NY 10038-5111
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/30/2025	Payee name Scale to Win LLC
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Amount (\$) \$15,556.98	Payee address; City; State; Zip Code 13742 Harper St Santa Ana, CA 92703-1419
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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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 Phone Services - State Activity
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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