

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 <small>(Residence or Business)</small>	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	THROUGH	Month Day Year
	01/01/2025		06/30/2025
11 ELECTION	ELECTION DATE		ELECTION TYPE
	Month Day Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff <input type="checkbox"/> Other
		<input type="checkbox"/> General	<input type="checkbox"/> Special

GO TO PAGE 2

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
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	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
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported 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 Denee (Ms.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77004	
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 Denee (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77004	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77047-2801	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77292-5922	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77292-5922	
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.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77028-3849	
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.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77028-3849	
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.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77028-3849	
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.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77028-3849	
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.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77028-3849	
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.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77028-3849	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77049-5701	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77049-5701	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77049-5701	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77049-5701	
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)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77080-7607	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77080-7607	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77080-7607	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77080-7607	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77080-7607	
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)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77080-7607	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77080-7607	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77080-7607	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77008-3706	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77008-3903	
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	7 Amount of Contribution (\$) \$125.00
6 Contributor address; City; State; Zip Code Houston, TX 77008-3903		
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	Amount of Contribution (\$) \$125.00
Contributor address; City; State; Zip Code Houston, TX 77008-3903		
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	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Houston, TX 77049-3989		
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	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Houston, TX 77049-3989		
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	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Houston, TX 77049-3989		
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	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Houston, TX 77086-1793		
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	Amount of Contribution (\$) \$175.00
Contributor address; City; State; Zip Code Houston, TX 77086-1793		
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	Amount of Contribution (\$) \$350.00
Contributor address; City; State; Zip Code Houston, TX 77086-1793		
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	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Houston, TX 77086-1793		
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	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Houston, TX 77086-1793		
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)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77004-5946	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77004-5946	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77004-5946	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77004-5946	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77004-5946	
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)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77004-5946	
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	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77009-8513	
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	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77009-8513	
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)	Amount of Contribution (\$) \$517.75
	Contributor address; City; State; Zip Code Humble, TX 77396-3428	
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)	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Humble, TX 77396-3428	
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)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Humble, TX 77396-3428	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Humble, TX 77396-3428	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Humble, TX 77396-3428	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Humble, TX 77396-3428	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Humble, TX 77396-3428	
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 (\$)
	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 (\$)
	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 (\$)
	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 (\$)
	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 (\$)
	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)	7 Amount of Contribution (\$)
	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 05/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Jason Andrew (Judge)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77008-6240	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77008-6240	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Humble, TX 77346-3127	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Humble, TX 77346-3127	
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 (\$) <div style="text-align: right;">\$10.00</div>
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 (\$) <div style="text-align: right;">\$10.00</div>
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 (\$) <div style="text-align: right;">\$10.00</div>
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 (\$) <div style="text-align: right;">\$10.00</div>
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 (\$) <div style="text-align: right;">\$10.00</div>
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 <hr/> 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 <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
Date 04/08/2025	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
Date 05/08/2025	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
Date 06/08/2025	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: 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 <hr/> 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 <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
Date 04/30/2025	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
Date 05/31/2025	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
Date 06/30/2025	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: 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 <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 02/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duble, Steven Michael <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77004-5142	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77004-5142	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77004-5142	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77004-5142	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77044-2253	
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 <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 02/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaido, Colleen <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Houston, TX 77005-3529		
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)	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Houston Texas, TX 77046-1130		
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)	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Houston Texas, TX 77046-1130		
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)	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Houston Texas, TX 77046-1130		
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)	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Houston Texas, TX 77046-1130		
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)	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code Houston Texas, TX 77046-1130	
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)	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Houston Texas, TX 77046-1130	
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	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77274-2442	
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	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Houston, TX 77269-1612	
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.)	Amount of Contribution (\$) \$15.78
	Contributor address; City; State; Zip Code Houston, TX 77009-7715	
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 (\$)
	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 (\$)
	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 (\$)
	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 (\$)
	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 (\$)
	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 (\$)
	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 (\$)
	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 (\$)
	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 (\$)
	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 (\$)
	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)	7 Amount of Contribution (\$) \$1,000.00
	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 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Sonya Leah (Judge)	Amount of Contribution (\$) \$103.45
	Contributor address; City; State; Zip Code Houston, TX 77001-0811	
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)	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 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Sonya Leah (Judge)	Amount of Contribution (\$) \$51.83
	Contributor address; City; State; Zip Code Houston, TX 77001-0811	
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)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77007-7004	
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 (\$)
	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 (\$)
	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 (\$)
	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 (\$)
	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 (\$)
	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)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77035-6005	
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)	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Houston, TX 77035-6005	
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)	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
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landau, Sarah Beth (Judge)	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Houston, TX 77009-7214	
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)	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Houston, TX 77009-7214	
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)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77009-7214	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77009-7214	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77009-7214	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77009-7214	
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)	Amount of Contribution (\$)
	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: 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 (\$)
	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 (\$)
	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 (\$)
	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 (\$)
	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 (\$)
	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)	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Spring, TX 77379-6566		
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)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Spring, TX 77379-6566		
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)	Amount of Contribution (\$) \$206.70
Contributor address; City; State; Zip Code Spring, TX 77379-6566		
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	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77057-2904		
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	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Spring, TX 77379-8201		
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)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77005-2652	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77005-2652	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77004-6206	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77266-7238	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Spring, TX 77379-3966	
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)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Spring, TX 77379-3966	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Spring, TX 77379-3966	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Spring, TX 77379-3966	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Spring, TX 77379-3966	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Spring, TX 77379-3966	
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	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Houston, TX 77003-1624	
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)	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Houston, TX 77002	
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)	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Houston, TX 77002	
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)	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Houston, TX 77002	
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)	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Houston, TX 77002	
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)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77002	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77002	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77071-3601	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77071-3601	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77071-3601	
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)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77071-3601	
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)	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Houston, TX 77071-3601	
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)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77071-3601	
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)	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Houston, TX 77071-3601	
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.)	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Houston, TX 77056-3221	
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.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77056-3221	
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.)	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Houston, TX 77056-3221	
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.)	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Houston, TX 77056-3221	
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.)	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Houston, TX 77056-3221	
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.)	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Houston, TX 77056-3221	
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 <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 02/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poritz, Darwin <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Houston, TX 77062-2189		
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	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Houston, TX 77052-3661		
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.)	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Houston, TX 77007-8266		
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.)	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Houston, TX 77007-8266		
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	Amount of Contribution (\$) \$175.00
Contributor address; City; State; Zip Code Missouri City, TX 77459-3802		
Principal occupation / Job title (See Instructions) State Representative		Employer (See Instructions) Civitas Engineering Group

MONETARY POLITICAL CONTRIBUTIONS

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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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SCHEDULE A1

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 <hr/> 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) <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 02/19/2025	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 03/19/2025	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 04/19/2025	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

MONETARY POLITICAL CONTRIBUTIONS

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)	7 Amount of Contribution (\$) \$125.00
	6 Contributor address; City; State; Zip Code Houston, TX 77235-5282	
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)	Amount of Contribution (\$) \$275.00
	Contributor address; City; State; Zip Code Houston, TX 77235-5282	
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)	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Houston, TX 77235-5282	
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)	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Houston, TX 77002-7017	
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)	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Houston, TX 77002-7017	
Principal occupation / Job title (See Instructions) Justice		Employer (See Instructions) Court of Appeals Fourteenth District of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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) 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) 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) 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) 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 Contributor address; City; State; Zip Code Houston, TX 77243-0854	Amount of Contribution (\$) \$150.00
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: 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

MONETARY POLITICAL CONTRIBUTIONS

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)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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.) <hr/> 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.) <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 02/26/2025	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 03/26/2025	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 04/26/2025	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

MONETARY POLITICAL CONTRIBUTIONS

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.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77096-4809	
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.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77096-4809	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77023-4523	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77023-4523	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77023-4523	
Principal occupation / Job title (See Instructions) Elected - Harris County Constable Precinct 6		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: 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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SCHEDULE A1

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)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77001-0226	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77001-0226	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77001-0226	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77001-0226	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77001-0226	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State Judiciary

MONETARY POLITICAL CONTRIBUTIONS

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)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77001-0226	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77001-0226	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77001-0226	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77001-0226	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77284-2495	
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 <hr/> 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 <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
Date 04/02/2025	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
Date 05/02/2025	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
Date 06/02/2025	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: 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)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77039-3713	
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)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77039-3713	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77095-4454	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77095-4454	
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	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77095-4454	
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.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77035-4337	
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Harris County
Date 02/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Fran J.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77035-4337	
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#: _____) Watson, Fran J.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77035-4337	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 03/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Fran J.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77035-4337	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Fran J.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77035-4337	
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: 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.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Houston, TX 77035-4337	
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.	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Houston, TX 77035-4337	
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)	Amount of Contribution (\$) \$517.75
	Contributor address; City; State; Zip Code Houston, TX 77004-1141	
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)	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Houston, TX 77004-1141	
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)	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Houston, TX 77004-1141	
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.) <hr/> 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.) <hr/> 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.) <hr/> 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.) <hr/> 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.) <hr/> 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)	7 Amount of Contribution (\$) \$322.34
	6 Contributor address; City; State; Zip Code Bellaire, TX 77401-5716	
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)	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Bellaire, TX 77401-5716	
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)	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Bellaire, TX 77401-5716	
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)	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Bellaire, TX 77401-5716	
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	8 Amount of contribution (\$) \$237.74	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 02/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Michael Patrick	Amount of contribution (\$) \$254.13	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 03/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Michael Patrick	Amount of contribution (\$) \$304.63	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)			

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	<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 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	<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 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	<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)			

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 ONLY 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 ONLY 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
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4 Date 01/26/2025	5 Payee name ActBlue Technical Services
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6 Amount (\$) \$1.99	7 Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132
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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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/02/2025	Payee name ActBlue Technical Services
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Amount (\$) \$0.80	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132
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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
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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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Date 02/09/2025	Payee name ActBlue Technical Services
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Amount (\$) \$3.57	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144-3132
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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
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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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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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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
4	Date 02/20/2025	5 Payee name Adobe Systems Incorporated	
6	Amount (\$) \$17.10	7 Payee address; City; State; Zip Code 345 Park Ave San Jose, CA 95110-2704	
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
4	Date 02/20/2025	5 Payee name Adobe Systems Incorporated	
6	Amount (\$) \$17.10	7 Payee address; City; State; Zip Code 345 Park Ave San Jose, CA 95110-2704	
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

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
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4 Date 01/31/2025	5 Payee name Alas, Roberto
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6 Amount (\$) \$1,654.02	7 Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832
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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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/31/2025	Payee name Alas, Roberto
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Amount (\$) \$1,336.63	Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832
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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
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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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Date 01/27/2025	Payee name Alvarado, Yolanda
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Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 6669 Fairfield St Houston, TX 77023
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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
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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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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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/26/2025	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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/27/2025	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 ONLY 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: 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
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4 Date 05/27/2025	5 Payee name Amalgamated Bank
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6 Amount (\$) \$6.62	7 Payee address; City; State; Zip Code 275 7th Ave New York, NY 10001-6708
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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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2025	Payee name AppFolio Inc.
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Amount (\$) \$1.97	Payee address; City; State; Zip Code 70 Castilian Dr Santa Barbara, CA 93117-3027
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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
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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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Date 02/20/2025	Payee name AppFolio Inc.
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Amount (\$) \$1.97	Payee address; City; State; Zip Code 70 Castilian Dr Santa Barbara, CA 93117-3027
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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
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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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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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
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4 Date 05/27/2025	5 Payee name Campbell, Baird
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6 Amount (\$) \$1,781.23	7 Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832
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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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/25/2025	Payee name Canva.coca
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Amount (\$) \$94.33	Payee address; City; State; Zip Code 3212 E Cesar Chavez St Building 1 Austin, TX 78702-4938
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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
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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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Date 02/20/2025	Payee name Carter & Hatcher Consulting LLC
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Amount (\$) \$69.13	Payee address; City; State; Zip Code 1015 Herkimer St Houston, TX 77008-6743
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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
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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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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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
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4 Date 01/31/2025	5 Payee name Concept Neighborhood
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6 Amount (\$) \$4,937.49	7 Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832
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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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2025	Payee name EasyDMARC
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Amount (\$) \$75.78	Payee address; City; State; Zip Code 8 The Grn Dover, DE 19901-3618
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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
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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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Date 02/20/2025	Payee name EasyDMARC
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Amount (\$) \$75.78	Payee address; City; State; Zip Code 8 The Grn Dover, DE 19901-3618
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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
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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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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
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4 Date 02/20/2025	5 Payee name First Data Merchant Services
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6 Amount (\$) \$308.61	7 Payee address; City; State; Zip Code 1307 Walt Whitman Rd Melville, NY 11747-3011
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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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2025	Payee name First Data Merchant Services
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Amount (\$) \$155.79	Payee address; City; State; Zip Code 1307 Walt Whitman Rd Melville, NY 11747-3011
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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
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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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Date 02/20/2025	Payee name First Data Merchant Services
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Amount (\$) \$2.77	Payee address; City; State; Zip Code 1307 Walt Whitman Rd Melville, NY 11747-3011
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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
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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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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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2025	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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 33/64 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 ONLY 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 ONLY 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
	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 (\$) \$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
	9 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
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4 Date 02/20/2025	5 Payee name Gusto
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6 Amount (\$) \$527.44	7 Payee address; City; State; Zip Code 525 2nd St San Francisco, CA 94107-1403
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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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2025	Payee name Gusto
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Amount (\$) \$3,146.99	Payee address; City; State; Zip Code 525 2nd St San Francisco, CA 94107-1403
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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
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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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Date 02/20/2025	Payee name Gusto
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Amount (\$) \$138.34	Payee address; City; State; Zip Code 525 2nd St San Francisco, CA 94107-1403
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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
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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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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
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4 Date 02/28/2025	5 Payee name Gusto
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6 Amount (\$) \$477.51	7 Payee address; City; State; Zip Code 525 2nd St San Francisco, CA 94107-1403
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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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/28/2025	Payee name Gusto
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Amount (\$) \$134.82	Payee address; City; State; Zip Code 525 2nd St San Francisco, CA 94107-1403
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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
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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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Date 03/25/2025	Payee name Gusto
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Amount (\$) \$128.00	Payee address; City; State; Zip Code 525 2nd St San Francisco, CA 94107-1403
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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
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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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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
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4 Date 06/25/2025	5 Payee name Hilton Americas Hotel
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6 Amount (\$) \$3,550.00	7 Payee address; City; State; Zip Code 1600 Lamar St Houston, TX 77010-5012
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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
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/25/2025	Payee name Hilton Americas Hotel
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Amount (\$) \$7,088.09	Payee address; City; State; Zip Code 1600 Lamar St Houston, TX 77010-5012
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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
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2025	Payee name IKEA
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Amount (\$) \$3.40	Payee address; City; State; Zip Code 7810 Katy Fwy Houston, TX 77024-2006
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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
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/03/2025	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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/03/2025	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 ONLY 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: 47/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
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4 Date 04/02/2025	5 Payee name Paragon Payment Solutions
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6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895
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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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/02/2025	Payee name Paragon Payment Solutions
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Amount (\$) \$25.00	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895
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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
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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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Date 06/02/2025	Payee name Paragon Payment Solutions
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Amount (\$) \$25.00	Payee address; City; State; Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895
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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
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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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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
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4 Date 01/31/2025	5 Payee name Pedersen, Nicole Biguenet
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6 Amount (\$) \$2,038.49	7 Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832
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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
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/28/2025	Payee name Pedersen, Nicole Biguenet
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Amount (\$) \$1,521.78	Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832
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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
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/27/2025	Payee name Pedersen, Nicole Biguenet
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Amount (\$) \$1,521.78	Payee address; City; State; Zip Code 3302 Canal St Houston, TX 77003-1832
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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
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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 ONLY 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 ONLY 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 ONLY 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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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 ONLY 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 ONLY 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 ONLY 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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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 ONLY 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 ONLY 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 ONLY 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
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4 Date 04/30/2025	5 Payee name Senate District 13
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6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 3813 Gertin St Houston, TX 77004-6503
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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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2025	Payee name Shepard Connection
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Amount (\$) \$790.00	Payee address; City; State; Zip Code 1022 Saulnier St Houston, TX 77019-4732
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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 Fundraising Consulting - Federal Reimbursement
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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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Date 02/20/2025	Payee name Shepard Connection
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Amount (\$) \$790.00	Payee address; City; State; Zip Code 1022 Saulnier St Houston, TX 77019-4732
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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 Fundraising Consulting - Federal Reimbursement
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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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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 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 ONLY 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 ONLY 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 ONLY 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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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		
	Candidate/Officeholder name	Office sought Office held
Date 03/25/2025	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		
	Candidate/Officeholder name	Office sought Office held
Date 03/25/2025	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		
	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: 58/64 Rpt:	2 FILER NAME Harris County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00015507
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4 Date 03/25/2025	5 Payee name Shopify
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6 Amount (\$) \$88.42	7 Payee address; City; State; Zip Code 33 New Montgomery St Ste 750 San Francisco, CA 94105-4537
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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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/25/2025	Payee name Shopify
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Amount (\$) \$2.82	Payee address; City; State; Zip Code 33 New Montgomery St Ste 750 San Francisco, CA 94105-4537
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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
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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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Date 03/25/2025	Payee name Shopify
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Amount (\$) \$2.65	Payee address; City; State; Zip Code 33 New Montgomery St Ste 750 San Francisco, CA 94105-4537
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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
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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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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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 ONLY 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 ONLY 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 ONLY 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
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4 Date 02/20/2025	5 Payee name SouthCross Security
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6 Amount (\$) \$38.44	7 Payee address; City; State; Zip Code PO Box 742145 Houston, TX 77274-2145
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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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2025	Payee name Strong Strategies
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Amount (\$) \$5,332.50	Payee address; City; State; Zip Code 5050 Woodway Dr Houston, TX 77056-1763
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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 Fundraising Consulting - Federal Reimbursement
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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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Date 02/20/2025	Payee name Switchboard Public Benefit Corp
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Amount (\$) \$187.56	Payee address; City; State; Zip Code PO Box 33485 Washington, DC 20033-0485
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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
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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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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
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4 Date 02/20/2025	5 Payee name Switchboard Public Benefit Corp
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6 Amount (\$) \$191.72	7 Payee address; City; State; Zip Code PO Box 33485 Washington, DC 20033-0485
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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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/25/2025	Payee name Switchboard Public Benefit Corp
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Amount (\$) \$440.81	Payee address; City; State; Zip Code PO Box 33485 Washington, DC 20033-0485
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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
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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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Date 06/25/2025	Payee name Switchboard Public Benefit Corp
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Amount (\$) \$303.49	Payee address; City; State; Zip Code PO Box 33485 Washington, DC 20033-0485
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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
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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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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 ONLY 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 ONLY 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 ONLY 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
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4 Date 02/20/2025	5 Payee name Wayfair
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6 Amount (\$) \$38.47	7 Payee address; City; State; Zip Code 4 Copley Pl Boston, MA 02116-6504
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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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2025	Payee name Zoom.US
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Amount (\$) \$66.53	Payee address; City; State; Zip Code 55 Almaden Blvd FI 6 San Jose, CA 95113-1608
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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
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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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Date 02/20/2025	Payee name Zoom.US
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Amount (\$) \$66.53	Payee address; City; State; Zip Code 55 Almaden Blvd FI 6 San Jose, CA 95113-1608
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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
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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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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
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4 Date 02/20/2025	5 Payee name Zoom.US
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6 Amount (\$) \$19.32	7 Payee address; City; State; Zip Code 55 Almaden Blvd FI 6 San Jose, CA 95113-1608
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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
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/27/2025	Payee name Zoom.US
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Amount (\$) \$66.53	Payee address; City; State; Zip Code 55 Almaden Blvd FI 6 San Jose, CA 95113-1608
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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
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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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UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule 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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