CORRECTION/AMENDMENT AFFIDAVIT FORM JCOR-C/OH FOR CANDIDATE/OFFICEHOLDER Filer ID (Ethics Commission Filers) 2 Total pages filed: **OFFICE USE ONLY** 00087573 22 Date Received CANDIDATE / MS / MRS / MR **FIRST** MI **ELECTRONICALLY FILED OFFICEHOLDER** The Honorable Andrew L. 07/15/2025 NAME NICKNAME LAST **SUFFIX** Johnson Date Hand-delivered or Date Postmarked **ORIGINAL** Runoff January 15 Other (specify) REPORT TYPE X July 15 Receipt # Exceeded modified reporting limit Amount 15th day after campaign treasurer 30th day before election appointment (officeholder only) Date Processed Final Report (Attach C/OH-FR) 8th day before election **ORIGINAL PERIOD** Month Month Day Year Day Year Date Imaged **COVERED THROUGH** 01/01/2025 06/30/2025 **EXPLANATION OF CORRECTION** I forgot to add the in-kind contribution made by the PAC, but I am correcting to add it immediately, still on the 7/15/2025 deadline to file my report. **AFFIDAVIT** I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Check the box next to any and all applicable statements: Semiannual reports: I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith. The Honorable Andrew L. Johnson Signature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said ____, this the ___ _____, 20_____, to certify which, witness my hand and seal of office.

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

Printed name of officer administering oath

Signature of officer administering oath

Title of officer administering oath

FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00087573 22 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Andrew L. NAME Date Received **ELECTRONICALLY FILED** 07/15/2025 NICKNAME LAST **SUFFIX** Johnson CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Robert C. NAME NICKNAME LAST **SUFFIX** McCabe **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 403-8377 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 01/01/2025 06/30/2025 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE Court Of Appeals, Justice Place 6 District 1

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

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13 C / OH NAME	Johnson, Andrew L. (The Honorable)	14 Filer ID 00087573	(Ethics Com	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expend These expenditures may have been made witho I officeholders are required to report this informa	ut the candidate's or offic	ceholder's kno	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
_					
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDR	RESS		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS(OTHER THES OF LOANS, OR CONTRIBUTIONS MADE E		\$	0.00
		CAL CONTRIBUTIONS		\$	33,500.56
EXPENDITURE	·	PLEDGES, LOANS, OR GUARANTEES OF LOA ZED POLITICAL EXPENDITURES	ANS)		221.24
TOTALS				\$	321.34
	4. TOTAL POLIT	ICAL EXPENDITURES		\$	5,513.72
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	E LAST DAY OF THE	\$	44,685.76
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A	AS OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		I swear, or affirm, under pen true and correct and include under Title 15, Election Code	s all information required		
		The Hon	orable Andrew L. Johi	nson	
		Signature	of Candidate or Officeho	older	
AFFIX NO	TARY STAMP / SEAL AB	OVE			
		aid	, this the		day
of	, 20, to co	ertify which, witness my hand and seal of office.			
Signature of office	er administering oath	Printed name of officer administering oath	Title of office	er administeri	ng oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

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					4 01 22
18 FIL	ER NAN	ME	19 Filer ID	(Ethics	Commission Filers)
Jo	hnson,	Andrew L. (The Honorable)	00087573		
		E SUBTOTALS		S	UBTOTAL AMOUNT
NA	ME OF	SCHEDULE			0010.7.2700.11
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	26,350.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	7,150.56
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	3,942.52
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	880.32
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	690.88
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 1/7 Rpt: 5/22
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Johnson, An	drew L. (The Honorable)				00087573
4	Date 01/13/2025	Full name of contributor Yetter Coleman LLPContributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$1,000.00
		Houston, TX 77002		T		
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	01/02/2025 Abrams, Barry Contributor address; City; State; Zip Code				\$500.00	
		Houston, TX 77079				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Lawyer			Partner		
		employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Blank Rome					
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	01/25/2025	Ammons, Rob	_			\$1,000.00
		Contributor address; City; Houston, TX 77006	State; Zip Code		•	
-	Contributor's F	I Principal Occupation		Contributor's Job Title		
	Lawyer			Partner		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Ammons Lav	w Firm				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 2/7 Rpt: 6/22
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Johnson, An	drew L. (The Honorable)				00087573
4	Date 01/28/2025	5 Full name of contributor Bender, Andrew6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$500.00
		Houston, TX 77056				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title	_	
	Attorney			Attorney		
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	ous	se (if any)
	Andrews Myers P.C.					
12	2 If contributor is	s a child, law firm of parent(s) (i	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	01/13/2025	Bracewell PAC	—			\$2,500.00
		Contributor address; City; Houston, TX 77002	State; Zip Code			
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	01/08/2025	Dobrowski, Paul	—			\$250.00
		Contributor address; City; Houston, TX 77007	State; Zip Code			
\vdash	Contributor's F	I Principal Occupation		Contributor's Job Title	_	
	Attorney			Partner		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	ous	se (if any)
		stafford Pierce, LLP				
	If contributor is	s a child, law firm of parent(s) (if	any)	L		

	MONET	ARY POLITICAL CONTRIB	UTIC	DNS		SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete	this f	orm.	1	Total pages Schedule A(J)1: Sch: 3/7 Rpt: 7/22
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Johnson, An	drew L. (The Honorable)				00087573
4	Date 01/04/2025	 Full name of contributor out-of-state P. Gould, Andrew Contributor address; City; State; Zip Code 	AC (ID#:_		7	Amount of Contribution (\$) \$100.00
		Houston, TX 77096				
8	Contributor's I	I Principal Occupation		9 Contributor's Job Title	_	
	Attorney Attorney					
10		employer/law firm		11 Law firm of contributor's sp	ous	se (if any)
	Arnold & Itki					
12	If contributor is	s a child, law firm of parent(s) (if any)		I		
	Date	Full name of contributor out-of-state PA	AC (ID#:_)		Amount of Contribution (\$)
	01/20/2025	Hagans, William Contributor address; City; State; Zip Code				\$250.00
		Houston, TX 77006				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Partner		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Hagans					
	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-of-state P.	AC (ID#:_)		Amount of Contribution (\$)
	01/01/2025	Haynes and Boone Political Action Com	mittee			\$2,500.00
		Contributor address; City; State; Zip Code Dallas, TX 75201				
	Contributor's F	L Principal Occupation		Contributor's Job Title		
		·				
	Contributor's 6	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		I		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this 1	form.	1	Total pages Schedule A(J)1: Sch: 4/7 Rpt: 8/22
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Johnson, An	drew L. (The Honorable)				00087573
4	Date 01/27/2025	5 Full name of contributor Hunton Andrews Kurth 76 Contributor address; City;)	7	Amount of Contribution (\$) \$2,500.00
		Houston, TX 77002				
8	Contributor's I	butor's Principal Occupation 9 Contributor's Job Title			<u> </u>	
10	10 Contributor's employer/law firm 11 Law firm of contrib			11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)	<u></u>		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	01/14/2025 Jackson Walker L.L.P. Political Action Committee Contributor address; City; State; Zip Code			·	\$2,500.00	
_	Contributorio	Dallas, TX 75201		Contributor's Job Title		
	Contributors	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	01/28/2025	Mithoff, Richard	_			\$1,500.00
		Contributor address; City; Houston, TX 77002	State; Zip Code		•	
	Contributor's F	Principal Occupation		Contributor's Job Title	_	
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Mithoff Law					
	If contributor is	s a child, law firm of parent(s) (if	fany)			

	MONET	ARY POLITICAL CONTRIBUTI	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 5/7 Rpt: 9/22
2	FILER NAME Johnson, An	ndrew L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00087573
4	Date 01/08/2025			7 Amount of Contribution (\$) \$250.00
8	Contributor's F	Principal Occupation	9 Contributor's Job Title	
_	Law Firm		Administrator	
10		employer/law firm repo, Harvin & Robbins, LLP	11 Law firm of contributor's sp	oouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (ID#	:)	Amount of Contribution (\$)
	02/13/2025	Reed Smith LLP Contributor address; City; State; Zip Code Pittsburgh, PA 15222		\$500.00
	Contributorio	<u> </u>	Contributor's Job Title	
	Continuators	Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's sp	oouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)	_ L	
	Date	Full name of contributor out-of-state PAC (ID#	::)	Amount of Contribution (\$)
	02/21/2025 Reynolds Frizzell LLP Contributor address; City; State; Zip Code Houston, TX 77002			\$1,000.00
	Contributor's I	Principal Occupation	Contributor's Job Title	<u> </u>
	Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL CONTRIBU	TIC	DNS		SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete t	his f	orm.	1	Total pages Schedule A(J)1: Sch: 6/7 Rpt: 10/22
2	FILER NAME Johnson, An	ndrew L. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00087573
4	Date 01/16/2025	_ `		7	Amount of Contribution (\$) \$1,000.00	
8	Contributor's I	I Principal Occupation		9 Contributor's Job Title		
	Attorney			Partner		
10		employer/law firm II Montgomery LLP		11 Law firm of contributor's sp	ous	se (if any)
12	If contributor i	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor ut-of-state PAC	(ID#:_)		Amount of Contribution (\$)
	01/23/2025	Susman Godfrey L.L.P. Contributor address; City; State; Zip Code Houston, TX 77002				\$2,500.00
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Continuator 3 i	Tillelpai Occupation		Continuator 3 300 Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	If contributor i	s a child, law firm of parent(s) (if any)		<u> </u>		
	Date	Full name of contributor uut-of-state PAC	(ID#:_)		Amount of Contribution (\$)
	01/17/2025 Vinson & Elkins Texas Political Action Committee Contributor address; City; State; Zip Code Houston, TX 77002		ee		\$5,000.00	
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	If contributor i	s a child, law firm of parent(s) (if any)		I		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A(J)1: Sch: 7/7 Rpt: 11/22
2	FILER NAME			1	Filer ID (Ethics Commission Filers)
_	Date	ndrew L. (The Honorable)			00087573
4	01/13/2025	5 Full name of contributor out-of-state PAC (ID#: Yetter Coleman LLP)	 ′ ′	Amount of Contribution (\$) \$1,000.00
	01/10/2020	6 Contributor address; City; State; Zip Code			Ψ1,000.00
		Houston, TX 77002			
8	Contributor's I	Principal Occupation	9 Contributor's Job Title		
10	Contributor's	employer/law firm	11 Law firm of contributor's sp	oouse	e (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	uction Guide explains how to complete this f	orm.	1 Total pages Scl Sch: 1/1 Rpt:	
2 FILER NAME Johnson, A	E ndrew L. (The Honorable)		3 Filer ID (Ethic 00087573	es Commission Filers)
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$	
5 Date 01/28/2025	6 Full name of contributor out-of-state PAC (ID#:	contribution (\$) \$1,017.70	9 In-kind contribution description I Judicial reception and fundraiser	
	Dallas, TX 75201			outside of Texas. Complete Schedule T.
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See ii	nstructions)
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 contributo	or's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 02/06/2025	Full name of contributor out-of-state PAC (ID#: Thompson, Coe, Cousins & Irons, LLP Contributor address; City; State; Zip Code			In-kind contribution description Paid for catering food and drinks for investiture at courthouse
	Dallas, TX 75201		Check if travel of	I Dutside of Texas. Complete Schedule T.
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See ii	nstructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL)	(See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 01/28/2025	Full name of contributor out-of-state PAC (ID#: Thompson, Coe, Cousins & Irons, LLP Contributor address; City; State; Zip Code			In-kind contribution description Paid for catering food and drinks for investiture at courthouse
	Dallas, TX 75201			l outside of Texas. Complete Schedule T.
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See in	nstructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL)	(See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

SCHEDULE F1

vertising Expense Event Expense Loan Repayment/Reimbu

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

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

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/6 Rpt: 13/22	Johnson, Andrew L. (The Honorable) 00087573
4 Date	5 Payee name
01/02/2025	Anedot Inc.
6 Amount (\$) \$20.30	7 Payee address; City; State; Zip Code 1340 Poydras Street, Suite 17
	New Orleans, LA 70112
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fee for online donation provider
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
01/04/2025	Anedot Inc.
Amount (\$) \$4.30	Payee address; City; State; Zip Code 1340 Poydras Street, Suite 17 New Orleans, LA 70112
PURPOSE	
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fee for online donation provider
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/08/2025	Anedot Inc.
Amount (\$) \$10.30	Payee address; City; State; Zip Code 1340 Poydras Street, Suite 17
	New Orleans, LA 70112
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fee for online donation provider
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

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

Food/Beverage Expense Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Ser		-	s/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME				3	Filer ID	(Ethics Commission Filer	rs)
	Sch: 2/6 Rpt: 14/22	Johnson, Andrew	(The Honorable)				00087573		,
4	Date	5 Payee name							
	01/08/2025	Anedot Inc.							
6	Amount (\$)	7 Payee address;	City; State; Zip	Code					
	\$10.30	1340 Poydras Stre	et, Suite 17						
		New Orleans, LA 7							
8	PURPOSE OF		ries listed at the top of this schedule)	(b)	Description				
	EXPENDITURE	Fees			ш		de of Texas. Com officeholder living		
					Fee for online				
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholde	r name Office s	l ought			Office he	eld	
_	<u> </u>								
	Date	Payee name							
	01/13/2025	Anedot Inc.							
	Amount (\$)	Payee address;	City; State; Zip	Code					
	\$40.30	1340 Poydras Stre	et, Suite 17						
		New Orleans, LA 7	70112						
	PURPOSE OF	(a) Category (See Category	ries listed at the top of this schedule)	(b)	Description				
	EXPENDITURE	Fees			<u> </u>		de of Texas. Com officeholder living		
					Fee for online				
					T CC 101 OTHITIC	, u	oriation prov	idei	
	Complete ONLY if direct	Candidate/Officeholde	r name Office s	l ought			Office he	eld	
	expenditure to benefit C/O								
	Date	Payee name							
	01/13/2025	Anedot Inc.							
	Amount (\$)	Payee address;	City; State; Zip	Code					
	\$40.30	1340 Poydras Stre	et, Suite 17						
		•							
		New Orleans, LA 7	'0112						
	PURPOSE	(a) Category (See Category	ries listed at the top of this schedule)	(b)	Description	_			
	OF EXPENDITURE	Fees					de of Texas. Com		
	_						officeholder living		
					Fee for online	. ul	σπαιίστι μισν	iuci	
_	Complete ONLY if direct	Condidate/Officels-1-1-	r nama	one.p.			Off: !-	uld	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholde	r name Office s	ougnt			Office he	eiu	
	,								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/6 Rpt: 15/22	Johnson, Andrew L. (The Honorable) 00087573
4 Date	5 Payee name
01/16/2025	Anedot Inc.
6 Amount (\$) \$40.30	7 Payee address; City; State; Zip Code 1340 Poydras Street, Suite 17 New Orleans, LA 70112
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fee for online donation provider
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/20/2025	Anedot Inc.
Amount (\$) \$10.30	Payee address; City; State; Zip Code 1340 Poydras Street, Suite 17
	New Orleans, LA 70112
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fee for online donation provider
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/25/2025	Anedot Inc.
Amount (\$) \$40.30	Payee address; City; State; Zip Code 1340 Poydras Street, Suite 17
	New Orleans, LA 70112
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fee for online donation provider
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/6 Rpt: 16/22	Johnson, Andrew L. (The Honorable) 00087573
4	Date	5 Payee name
	01/28/2025	Anedot Inc.
6	Amount (\$) \$20.30	7 Payee address; City; State; Zip Code 1340 Poydras Street, Suite 17
		New Orleans, LA 70112
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fee for online donation provider
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/12/2025	Colon & Co.
	Amount (\$) \$1,332.36	Payee address; City; State; Zip Code 7941 Katy Freeway, #108
		Houston, TX 77024
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payment for investiture management fee and security for event
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/10/2025	Fort Bend County Republican Party
	Amount (\$) \$300.00	Payee address; City; State; Zip Code 14019 SW Freeway #340
		Sugar Land, TX 77478
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense For Fort Bend County Republican Party Lincoln Reagan dinner
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 5/6 Rpt: 17/22	Johnson, Andrew L. (The Honorable) 00087573				
4	Date	5 Payee name				
	03/06/2025	Johnson, Andrew				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$634.88	2502 Big Cedar Dr.				
		Kingwood, TX 77345				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Reimbursement Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense Reimburse self for judicial robe, coffee for chambers,				
		and investiture party supplies food drinks				
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
_	Date	Payee name				
	06/17/2025	Johnson, Andrew				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$423.28	2502 Big Cedar Dr.				
		Kingwood, TX 77345				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Reimbursements Check if travel outside of Texas. Complete Schedule T.				
	Check if Austin, TX, officeholder living expense Lunch with intern and staff, intern HBA lunci					
		for chambers, TBLS annual fee				
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI					
	Date	Payee name				
	06/16/2025	Johnson, Andrew				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$515.00	2502 Big Cedar Dr.				
		Kingwood, TX 77345				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Reimburse Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense For donation to Brenham Heritage Museum Gala				
		For donation to breiniam heritage wuseum Gala				
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI					
_						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	nmittee Legal Service	demorials Expense is ction Guide explains		ges/Contract Labor	Travel Out of I OTHER (enter	District a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3 Filer ID	(Ethics Commission Filers)
	Sch: 6/6 Rpt: 18/22		Johnson, Andrew L. (The Honorable)			00087573	3
4	Date	5	Payee name					
	05/02/2025		Young, Deborah					
6	Amount (\$)	7	Payee address; City	y; Stat	e; Zip Cod	е		
	\$500.00		301 Fannin St.					
			Houston, TX 77002					
8	PURPOSE	(a)	Category (See Categories	listed at the top of this so	chedule) (I	Description		
	OF EXPENDITURE		Court Cheer Fund			ш	I outside of Texas. Co	
							n, TX, officeholder livi	und that is used by court
							e event expens	
Ļ	Complete ONE V if allow -+	<u> </u>	Condidate/Office held		Office assert		Office	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder n	ame	Office sough	IL	Office	neia
_								
ı								

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Candidate/Officeholder/Politica	-		-	THER (enter a category not listed above)				
		ruction Guide explains how	to complete this form.	_				
1 Total pages Schedule F4:		3 Filer ID (Ethics Commission Filers)						
Sch: 1/1 Rpt: 19/22	Johnson, Andrew L	00087573						
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED	a				
ISSUER	Bank of	America	EXPENDITURES CHARGED TO A CREDIT	\$ 321.34				
			CARD					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid				
	\$43.98	06/15/2025						
	, , , , , ,							
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
			4517 Kingwood Dr.					
	HEB							
			Kingwood, TX 77345					
8 PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top		Coffee for chambers					
X Political	Food/Beverage Exper	rise						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX.	officeholder living expense				
9 Complete ONLY if direct	Candidate/Officeholder	•	e sought	Office held				
expenditure to benefit C/OH			· ·					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid				
	\$515.00	06/17/2025						
	φ313.00	00/11/2023						
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
			105 South Market Street					
	Brenham Heritage I	Museum						
			Brenham, TX 77833					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top		Sponsorship to Brenham Heritage Museum gala					
X Political	Contributions/Donatio Candidate/Officeholde							
Non-Political		of Texas. Complete Schedule T.	Check if Austin, TX.	officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder		e sought	Office held				
expenditure to benefit C/OH			3					

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Bev Gift/Awar e Legal Ser	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule G:	2 [][R NAME				3	Filer ID	(Ethics Commission Filers)	
1	Sch: 1/3 Rpt: 20/22			L. (The Honorable)			ļ -	000875	,	
4	Date	5 Pave	ee name				<u> </u>			
	04/19/2025		k of America							
6	Amount (\$)	7 Paye	ee address;	City; Stat	te; Zip Co	ode				
	\$200.00	РО	Box 25118							
	Reimbursement from political contributions intended	Tan	າpa, FL 33622							
8	PURPOSE	(a) Cate	egory (See Catego	ries listed at the top of this s	chedule)	(b) Description	Che	eck if travel	outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Cre	dit Card Payme	ent		[Che	eck if Austin	n, TX, officeholder living expense	
	EXPENDITORE					Paying credit car Board of Legal S			r payment made to Texas n for certification	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	f direct Candidate/Officeholder name Office sought nefit							Office held	
	Date	Paye	ee name							
	06/12/2025	Ban	k of America							
	Amount (\$)	Paye	ee address;	City; Stat	te; Zip Co	ode				
	\$121.34	PO	Box 25118							
	Reimbursement from political contributions intended	Tampa, FL 33622								
			Category (See Categories listed at the top of this schedule) Description Check if travel out						outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Cre	dit Card Payme		Check if Austin, TX, officeholder living expense					
						Making payment and HBA lunch	on (credit ca	ard charge for intern lunch	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candida	te/Officeholder n	ame		Office sought			Office held	
	Date	Paye	ee name							
	02/06/2025	HÉE								
	Amount (\$)	Paye	ee address;	City; Stat	te; Zip Co	ode				
	\$162.29	451	7 Kingwood Dr	r.						
	Reimbursement from political contributions intended	Kinç	gwood, TX 773	45						
	PURPOSE	Cate	egory (See Catego	ries listed at the top of this s	chedule)	Description	Che	eck if travel	outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Foo	d/Beverage Ex	rpense		[Che	eck if Austin	n, TX, officeholder living expense	
	LAI LIMITORE					BBQ for investitu	re p	arty		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candida	te/Officeholder n	ame		Office sought			Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Gift/Awards/Memorials Expense Printing Expense ttee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.						Travel Mustality Travel Out of District OTHER (enter a category not listed above)				
1	1 Total pages Schedule G: 2 FILER		FILER NAME 3					3	Filer ID (Ethics Co	ommission Filers)		
	Sch: 2/3 Rpt: 21/22	Jo	ohnson, An	drew L. (The H	lonorable)				00087573			
4	Date	5 Pa	ayee name					•				
	02/07/2025	н	EB									
6	Amount (\$)	7 Pa	ayee address	s; City;	State;	Zip Co	ode					
	\$125.31	45	517 Kingwo	od Dr.								
	Reimbursement from political contributions intended	Ki	ingwood, T	X 77345								
8	PURPOSE	(a) Ca	ategory (See	Categories listed at t	he top of this sche	edule)	(b) Description	=	eck if travel outside of Texa	·		
	OF EXPENDITURE	Fo	ood/Bevera	ge Expense			L		eck if Austin, TX, officehold			
							Supplies, food, a	and o	drinks for investitui	re party		
		<u> </u>										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candid	date/Officeho	older name			Office sought		Office he	lld		
	Date	Pa	ayee name									
	03/05/2025	н	EB									
	Amount (\$)	Pa	ayee address	s; City;	State;	Zip Co	ode					
	\$23.98	45	4517 Kingwood Dr.									
	Reimbursement from											
	x political contributions intended	Ki	ingwood, T	X 77345								
	PURPOSE	Cá	ategory (See	Categories listed at t	he top of this sche	edule)	Description	Ch	eck if travel outside of Texa	as. Complete Schedule T.		
OF EXPENDITURE		Fo	ood/Bevera	rage Expense			[Ch	eck if Austin, TX, officehold	ler living expense		
	EXI ENDITORE					Coffee for cham	ibers					
		Candid	date/Officeho	older name			Office sought		Office he	ld		
	expenditure to benefit C/OH											
	Date											
	Date 04/09/2025		ayee name									
			EB	0''								
	Amount (\$)	l	ayee address		State;	Zip Co	ode					
	\$28.98	45	517 Kingwo	100 Dr.								
	X Reimbursement from political contributions intended	Ki	ingwood, T	X 77345								
	PURPOSE	Ca	ategory (See	Categories listed at t	he top of this sche	edule)	Description	=	eck if travel outside of Texa			
	OF EXPENDITURE	F	ood/Bevera	ge Expense			L	_	eck if Austin, TX, officehold	ler living expense		
							Coffee for cham	bers	i			
_	Complete ONLY if direct	Candi	date/Officeho	ldor nama			Office course		Office he	ıld		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cariui	uate/Onicent	older Hame			Office sought		Onice ne	uu		
l												

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Total pages Schedule G: Filer ID (Ethics Commission Filers) Sch: 3/3 Rpt: 22/22 Johnson, Andrew L. (The Honorable) 00087573 Date Payee name 05/15/2025 HEB 6 Amount (\$) Payee address; City; State; Zip Code \$28.98 4517 Kingwood Dr. Reimbursement from political contributions intended Х Kingwood, TX 77345 (a) Category (See Categories listed at the top of this schedule) **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Coffee for chambers Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH