CORRECTION/AMENDMENT AFFIDAVIT FORM JCOR-C/OH FOR CANDIDATE/OFFICEHOLDER Filer ID (Ethics Commission Filers) 2 Total pages filed: **OFFICE USE ONLY** 00081751 126 Date Received CANDIDATE / MS / MRS / MR **FIRST** MI **ELECTRONICALLY FILED OFFICEHOLDER** The Honorable Beau A. 07/15/2025 NAME NICKNAME **LAST SUFFIX** Miller Date Hand-delivered or Date Postmarked **ORIGINAL** Runoff January 15 Other (specify) REPORT TYPE X July 15 Exceeded modified reporting limit Receipt # 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** Mistakenly omitted two expenditures on 6/5/2025 on the original filing. One for \$190.05 for AV equipment rental and another for \$63.87 for printing expenses. This mistake was caught and corrected on July 15th. **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 Beau A. Miller Signature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE

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

Printed name of officer administering oath

_____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Sworn to and subscribed before me, by the said

____, this the ___

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) 00081751 126 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Beau A. NAME Date Received **ELECTRONICALLY FILED** 07/15/2025 NICKNAME LAST **SUFFIX** Miller CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Kathryn NAME NICKNAME LAST **SUFFIX** McNiel **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** (832) 651-0044 **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 χ Primary Runoff Other 03/03/2026 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 190 Harris

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

3 of 126

| 13 C / OH NAME | Miller, Beau A. (The I | Honorable) | 14 Filer ID (I 00081751 | Ethics Commission Filers) |
|--|----------------------------------|---|---|---|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) | candidate / officeholder. | political contributions accepted or political expenditu These expenditures may have been made without I officeholders are required to report this information | the candidate's or office | holder's knowledge or |
| Additional Pages | COMMITTEE TYPE | COMMITTEE NAME | | |
| , taditoria i agos | GENERAL | | | |
| | | COMMITTEE ADDRESS | | |
| | SPECIFIC | | | |
| | | COMMITTEE CAMPAIGN TREASURER NAME | | |
| | | COMMITTEE CAMPAIGN TREASURER ADDRES | SS | |
| 16 CONTRIBUTION | 1. TOTAL UNITEM | ZED POLITICAL CONTRIBUTIONS(OTHER THAI | N PLEDGES, LOANS, | |
| TOTALS | | ES OF LOANS, OR CONTRIBUTIONS MADE ELE | CTRONICALLY) | \$ 0.00 |
| | | ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN | S) | \$ 386,471.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEM | ZED POLITICAL EXPENDITURES | | \$ 0.00 |
| | 4. TOTAL POLIT | CAL EXPENDITURES | | \$ 76,814.38 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITIC REPORTING PE | AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD | AST DAY OF THE | \$ 305,379.27 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIP OF THE REPOR | AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD | OF THE LAST DAY | \$ 0.00 |
| 17 AFFIDAVIT | | I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code. | y of perjury, that the acc Ill information required to | ompanying report is to be reported by me |
| | | The Hon | norable Beau A. Miller | |
| | | Signature of | Candidate or Officehold | der |
| AFFIX NO | TARY STAMP / SEAL ABO | DVE | | |
| | | aid | , this the | day |
| of | , 20, to ce | ertify which, witness my hand and seal of office. | | |
| Signature of office | cer administering oath | Printed name of officer administering oath | Title of officer | administering oath |

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

| | | | | | 4 of 126 |
|----|---|--|-----------------------------|-------|-----------------------|
| | ER NAN | ME au A. (The Honorable) | 19 Filer ID 00081751 | (Ethi | cs Commission Filers) |
| | | | 00061751 | | |
| | | E SUBTOTALS SCHEDULE | | | SUBTOTAL AMOUNT |
| 1. | Х | \$ | 379,471.00 | | |
| 2. | Х | \$ | 7,000.00 | | |
| 3. | | \$ | | | |
| 4. | | \$ | | | |
| 5. | 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | | | | 76,814.38 |
| 6. | 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | | | |
| 7. | | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION | ONS | \$ | |
| 8. | | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ | |
| 9. | | SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | | \$ | |
| 10 | . 🔲 | SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS | OF C/OH | \$ | |
| 11 | . 🔲 | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | ONS | \$ | |
| 12 | . <u> </u> | \$ | | | |
| | | | | • | |

| | MONET | ARY POLITICAL | CONTRIBUTION | DNS | SCHEDULE A(J)1 |
|----|---|--|--------------------------|---------------------------------------|---|
| | The Instru | ction Guide explains ho | w to complete this f | form. | 1 Total pages Schedule A(J)1: Sch: 1/79 Rpt: 5/126 |
| 2 | FILER NAME | | | | 3 Filer ID (Ethics Commission Filers) |
| | Miller, Beau | A. (The Honorable) | | | 00081751 |
| 4 | Date | 5 Full name of contributor | out-of-state PAC (ID#: | | 7 Amount of Contribution (\$) |
| | 05/13/2025 | AZA Law | | | \$5,000.00 |
| | | 6 Contributor address; City; | State; Zip Code | | |
| | | Houston, TX 77010 | | · | |
| 8 | Contributor's F | Principal Occupation | | 9 Contributor's Job Title | |
| 10 | Contributor's 6 | employer/law firm | | 11 Law firm of contributor's s | pouse (if any) |
| 12 | If contributor is | s a child, law firm of parent(s) (i | f any) | | |
| | Date | Full name of contributor | D out of state BAC (ID#) | , | Amount of Contribution (\$) |
| | 05/23/2025 | Adams, Caroline | out-of-state PAC (ID#: |) | \$500.00 |
| | 03/23/2023 | Contributor address; City; | Ctata: 7in Cada | | |
| | | Houston, TX 77005 | | | |
| | | Principal Occupation | | Contributor's Job Title | |
| | Attorney | | | Attorney | |
| | | employer/law firm | | Law firm of contributor's s | pouse (if any) |
| | Buzbee Law | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | t any) | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 06/04/2025 | Adjei, Alvin | | | \$1,000.00 |
| | | Contributor address; City; | State; Zip Code | | |
| | | Soottle, WA 09101 | | | |
| | | Seattle, WA 98101 | | Contributor's Job Title | |
| | Canatuila, italija I | Dringing Consumption | | Contributor's Job Title | |
| | | Principal Occupation | | Attorney | |
| | Attorney | | | Attorney Law firm of contributor's s | nouse (if any) |
| | Attorney Contributor's e | Principal Occupation employer/law firm yment Attorneys LLP | | Attorney Law firm of contributor's s | pouse (if any) |
| | Attorney Contributor's e HKM Employ | employer/law firm | f any) | | pouse (if any) |
| | Attorney Contributor's e HKM Employ | employer/law firm yment Attorneys LLP | f any) | | pouse (if any) |
| | Attorney Contributor's e HKM Employ | employer/law firm yment Attorneys LLP | f any) | | pouse (if any) |
| | Attorney Contributor's e HKM Employ | employer/law firm yment Attorneys LLP | f any) | | pouse (if any) |
| | Attorney Contributor's e HKM Employ | employer/law firm yment Attorneys LLP | f any) | | pouse (if any) |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|--|---|------------------------|--|----------------|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 2/79 Rpt: 6/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | O6/10/2025 Adler, Jim 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$5,000.00 | | |
| | | Houston, TX 77027 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Trial Attorne | | | Trial Attorney | | |
| 10 | | employer/law firm Id Associates | | 11 Law firm of contributor's sp | oous | se (if any) |
| 12 | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/02/2025 Adrogue, Matias Contributor address; City; State; Zip Code | | | \$250.00 | | |
| | | Houston, TX 77006 | | T | | |
| | Trial Lawyer | Principal Occupation | | Contributor's Job Title | | |
| | | employer/law firm | | Trial Lawyer Law firm of contributor's sp | 20110 | o (if any) |
| | Matias J. Ad | | | Matias J. Adrogue PLLO | | e (II aliy) |
| | | s a child, law firm of parent(s) (i | f any) | manae o. / larogue i | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/25/2025 | Agee, Kirk Contributor address; City; Houston, TX 77023 | State; Zip Code | | . . | \$5,000.00 |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Lawyer | | | Lawyer | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Pusch & Ng | uyen Injury Lawyers | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | SCHEDULE A(J)1 | | | |
|--|---|---|--|--|---|--|
| | The Instru | ction Guide explains ho | w to complete this f | form. | 1 Total pages Schedule A(J)1: Sch: 3/79 Rpt: 7/126 | |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 Filer ID (Ethics Commission Filers) 00081751 | |
| 4 | Date 5 Full name of contributor out-of-state PAC (ID#:) Akerman LLP 6 Contributor address; City; State; Zip Code | | 7 Amount of Contribution (\$) \$1,000.00 | | | |
| _ | | Houston, TX 77056 | | 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 | pouse (if any) | |
| 12 | ! If contributor i | s a child, law firm of parent(s) (if | any) | | | |
| Date Full name of contributor out-of-state PAC (ID#: | | | Amount of Contribution (\$) \$5,000.00 | | | |
| | | Houston, TX 77008 | | | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| | Owner/Attor | - | | Owner/Attorney | | |
| | Amaro Law | employer/law firm | | Law firm of contributor's sp Amaro Law Firm | oouse (if any) | |
| | | s a child, law firm of parent(s) (if | any) | Amaio Law Pimi | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| | 06/26/2025 | Americare Pain and Reh | ab Centers | | \$2,500.00 | |
| | | Contributor address; City; S Houston, TX 77022 | State; Zip Code | | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | | |
| | | | | | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oouse (if any) | |
| | If contributor i | s a child, law firm of parent(s) (if | any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|----------------------------|---|------------------------|---------------------------------|----------|---|
| | The Instru | ction Guide explains ho | w to complete this t | form. | 1 | Total pages Schedule A(J)1: Sch: 4/79 Rpt: 8/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 05/30/2025 | 5 Full name of contributor Anthony Buzbee LP6 Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$5,000.00 |
| • | Contributorlo | Houston, TX 77002 | | O Contributorio lob Title | | |
| ° | Continuators | 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 | 2 If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Τ | Amount of Contribution (\$) |
| | 05/27/2025 | Armstrong, Lee, & Bake Contributor address; City; | r LLP | | | \$5,000.00 |
| | | Houston, TX 77092 | | T | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 05/23/2025 | Arnold, Kurt Contributor address; City; Houston, TX 77007 | State; Zip Code | | | \$5,000.00 |
| | Contributor's F | I Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Attorney | | | Attorney | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | Arnold & Itki | n | | Arnold & Itkin | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
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| | MONET | ARY POLITICAL (| CONTRIBUTIO | DNS | | SCHEDULE A(J)1 |
|----|-------------------------|--|-------------------------|--|--|---|
| | The Instru | ction Guide explains how | to complete this f | orm. | 1 | Total pages Schedule A(J)1: Sch: 5/79 Rpt: 9/126 |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission Filers) |
| | Miller, Beau | A. (The Honorable) | | | ┖ | 00081751 |
| 4 | Date 06/25/2025 | | | 7 | Amount of Contribution (\$) \$5,000.00 | |
| | | Houston, TX 77002 | | | | |
| 8 | Contributor's I retired | Principal Occupation | | 9 Contributor's Job Title retired | | |
| 10 | Contributor's e | employer/law firm | | 11 Law firm of contributor's sp Abraham Watkins Nicho | | ` ', |
| 12 | 2 If contributor i | s a child, law firm of parent(s) (if a | ny) | | | |
| | Date 05/19/2025 | Full name of contributor Aziz, Muhammad | out-of-state PAC (ID#:_ |) | Ī | Amount of Contribution (\$) \$5,000.00 |
| | | Contributor address; City; St Houston, TX 77002 | ate; Zip Code | | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | | |
| | Law Partner | | | Law Partner | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Abraham, W | atkins, Nichols, Agosto, Aziz a | & Stogner | | | |
| | If contributor i | s a child, law firm of parent(s) (if a | ny) | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | T | Amount of Contribution (\$) |
| | 06/18/2025 | Baker Botts Amicus Fund | _ | | | \$2,500.00 |
| | | Contributor address; City; St | | | | |
| | | Houston, TX 77002 | | | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | If contributor i | s a child, law firm of parent(s) (if a | ny) | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|----------------------------|--|------------------------|---------------------------------|----------|--|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 6/79 Rpt: 10/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 05/27/2025 | 5 Full name of contributor Barrow, Hunter6 Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$500.00 |
| | | Houston, TX 77056 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| L | Shareholder | | | Shareholder | | |
| 10 | Andrews My | employer/law firm ers PC | | 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) | I . | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/02/2025 | Barton Law Firm Contributor address; City; | State; Zip Code | | | \$1,500.00 |
| | 0 | Houston, TX 77007 | | | | |
| | 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 (\$) |
| | 06/25/2025 | Barton, Trey Contributor address; City; Houston, TX 77027 | State; Zip Code | | | \$1,000.00 |
| - | Contributor's F | I Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Personal Inju | ury Attorney | | Personal Injury Attorney | y | |
| Г | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Trey Barton | Law | | | | |
| | 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 | ow to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 7/79 Rpt: 11/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 05/14/2025 | 5 Full name of contributor Beck Redden LLP 6 Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$1,000.00 |
| | | Houston, TX 77010 | | | | |
| 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#: |) | Г | Amount of Contribution (\$) |
| | 06/29/2025 | Bender, Aaron Contributor address; City; Houston, TX 77003 | State; Zip Code | | | \$1,000.00 |
| | 0 | ļ | | Contributorio Job Title | <u> </u> | |
| | | Principal Occupation | | Contributor's Job Title | | |
| _ | Managing Pa | employer/law firm | | Managing Partner | | on (if any) |
| | Bender Law | , , | | Law firm of contributor's sp | Jous | se (II arry) |
| | | | fond | | | |
| | ii contributor i | s a child, law firm of parent(s) (i | rany) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | T | Amount of Contribution (\$) |
| | 06/24/2025 | Bender, Andrew | | | | \$2,026.00 |
| | | Contributor address; City; Houston, TX 77002 | State; Zip Code | | | |
| - | Contributor's I | Principal Occupation | | Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Andrews My | | | | | • |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | - | | |
| | | | | | | |

| | 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: 8/79 Rpt: 12/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 1 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | 05/19/2025 Benny Agosto Jr. PC 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$2,500.00 | | |
| | | 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 | oous | e (if any) |
| 12 | ! If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | Ι | Amount of Contribution (\$) |
| | 05/15/2025 | Binstock, Robert Contributor address; City; | <u> </u> | | | \$1,000.00 |
| | | Houston, TX 77027 | | | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| | Reich and B | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | tany) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/06/2025 | Birdsell, Andrew | | | | \$100.00 |
| | | Contributor address; City; Houston, TX 77008 | State; Zip Code | | • | |
| - | Contributor's I | rincipal Occupation | | Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | | sell Mediation | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTIO | ONS | | SCHEDULE A | 4(J)1 |
|----|----------------------------|--|------------------------|---------------------------------|----------|---|------------|
| | The Instru | ction Guide explains ho | w to complete this t | form. | 1 | Total pages Schedule A(J)1 Sch: 9/79 Rpt: 13/126 | |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission 00081751 | on Filers) |
| 4 | Date 06/04/2025 | 5 Full name of contributor Bissinger, David6 Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) | \$500.00 |
| | | Houston, TX 77019 | | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | | |
| | Attorney | | | Attorney | | | |
| 10 | | employer/law firm shman, Williams & Strasburg | ner II D | 11 Law firm of contributor's sp | oous | se (if any) | |
| 12 | | s a child, law firm of parent(s) (if | | | | | |
| | - II dontination is | o a orma, iaw iiiii or paroni(o) (ii | u.,,, | | | | |
| H | Date | Full name of contributor | out-of-state PAC (ID#: |) | Τ | Amount of Contribution (\$) | |
| | 06/23/2025 | Bobby K. Newman PC | _ ` ` | | | `, | \$1,000.00 |
| | | Contributor address; City; S | State; Zip Code | | | | |
| | Contributor's F | I Principal Occupation | | Contributor's Job Title | | | |
| | | | | | | | |
| | Contributor's 6 | employer/law firm | | Law firm of contributor's sp | oous | se (if any) | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 05/27/2025 | Bracewell PAC | | | | | \$1,000.00 |
| | | Contributor address; City; : Houston, TX 77002 | State; Zip Code | | | | |
| | Contributor's F | 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) | <u> </u> | | | |
| | | | | | | | |

| | 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: 10/79 Rpt: 14/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | 05/15/2025 Bradley, Arant, Boult, Cummings Texas PAC 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$1,000.00 | | |
| | | Dallas, TX 75270 | | | | |
| 8 | Contributor's F | Principal Occupation | | 9 Contributor's Job Title | | |
| 10 | Contributor's 6 | employer/law firm | | 11 Law firm of contributor's sp | oou | se (if any) |
| 12 | 2 If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | T | Amount of Contribution (\$) |
| | 06/26/2025 | Brammer, Javier Contributor address; City; Sugar Land, TX 77479 | <u> </u> | | | \$1,000.00 |
| | Cantuila utaula I | _ | | Contributor's Job Title | | |
| | Imaging facil | Principal Occupation | | Imaging facility | | |
| | | employer/law firm | | Law firm of contributor's sp | 2011 | co (if any) |
| | | iagnostic Group | | Law IIIII of Contributor's Sp | Jou. | se (II ally) |
| | | <u> </u> | · anu) | | | |
| | ii contributor is | s a child, law firm of parent(s) (if | any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 05/28/2025 | Brann, Scott | | | l | \$500.00 |
| | | Contributor address; City; Houston, TX 77007 | State; Zip Code | | • | |
| - | Contributor's F | rincipal Occupation | | Contributor's Job Title | | |
| | lawyer | iniopai o coapation | | lawyer | | |
| | Contributor's 6 | employer/law firm | | Law firm of contributor's sp | oou | se (if any) |
| | Brann Sulliva | an Trial Lawyers, PLLC | | | | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|---|---|------------------------|------------------------------|--|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 11/79 Rpt: 15/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/04/2025 | 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$5,000.00 | |
| | | Sugar Land, TX 77479 | | | | |
| 8 | Contributor's I | Principal Occupation | | 9 Contributor's Job Title | | |
| | Personal injury lawyer Personal injury lawyer | | | | | |
| 10 | 0 Contributor's employer/law firm 11 Law firm of contributor's sp The West Law Firm | | | | oous | se (if any) |
| 12 | ! If contributor is | s a child, law firm of parent(s) (i | any) | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | Ī | Amount of Contribution (\$) |
| | 05/18/2025 | Broocks, Linda Contributor address; City; Houston, TX 77002 | State; Zip Code | | | \$100.00 |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Case Manager Case Manager | | | | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | | ty Protective Services | | Kean Miller, LLP | | |
| | If contributor is | s a child, law firm of parent(s) (i | any) | 1 | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 05/15/2025 | Bryant, Terry Contributor address; City; Houston, TX 77024 | State; Zip Code | | - | \$600.00 |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | _ | |
| | Attorney | | | Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Self | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|---|--|------------------------|----------------------------------|----------|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 12/79 Rpt: 16/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/24/2025 | 5 Full name of contributorBui, Duy6 Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$1,000.00 |
| | | Houston, TX 77022 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Business ow | | | Business owner | | |
| 10 | Lo Contributor's employer/law firm Lindale healthcare clinic | | | | 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 (\$) |
| | 06/25/2025 | Cano, Brian Contributor address; City; | State; Zip Code | | | \$1,000.00 |
| | O - stalle stands I | Houston, TX 77055 | | Contribute de la Ede | | |
| | Attorney | Principal Occupation | | Contributor's Job Title Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | 2011 | se (if any) |
| | Fee Smith & | • • | | Edw IIIII of Contributor 5 Sp | Jou. | se (ii diiy) |
| - | | s a child, law firm of parent(s) (i | f any) | | | |
| | | ,, | ., | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | T | Amount of Contribution (\$) |
| | 06/03/2025 | Carullo, Nicholas | _ | | | \$1,000.00 |
| | | Contributor address; City; New York, NY 10013 | State; Zip Code | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Partner | morpai Occupation | | Partner | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Susman Goo | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTIO | ONS | | SCHEDULE A(J)1 |
|----|---|--|------------------------|---------------------------------|----------|---|
| | The Instru | ction Guide explains ho | ow to complete this t | form. | 1 | Total pages Schedule A(J)1: Sch: 13/79 Rpt: 17/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 05/28/2025 | 5 Full name of contributorChamberlain Hrdlicka W6 Contributor address; City; | | | 7 | Amount of Contribution (\$) \$500.00 |
| | | Houston, TX 77002 | | | | |
| 8 | Contributor's F | Principal Occupation | | 9 Contributor's Job Title | | |
| 10 | Contributor's e | employer/law firm | | 11 Law firm of contributor's sp | oous | se (if any) |
| 12 | 2 If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Τ | Amount of Contribution (\$) |
| | 05/16/2025 | Chandler, Brian Contributor address; City; | <u> </u> | | | \$1,000.00 |
| | | Houston, TX 77057 | | | | |
| | Contributor's Principal Occupation Contributor's Job Title | | | | | |
| | Shareholder | | | Shareholder | | |
| | | employer/law firm ndler Schein, PC | | Law firm of contributor's sp | oous | se (if any) |
| | | s a child, law firm of parent(s) (i | f any) | | | |
| | ii contributor i. | s a criliu, law littii or paretii(s) (i | i arry) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/04/2025 | Cienfuegos, Daniel | | | | \$25.00 |
| | | Contributor address; City; Houston, TX 77018 | | | | |
| | Contributor's F | I | | Contributor's Job Title | <u> </u> | |
| | Attorney | | | Attorney | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Lobo Ley | | | MD Anderson | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|--|--|------------------------|---|-------|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 14/79 Rpt: 18/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/03/2025 | 5 Full name of contributor Clinton-Jones, Sarah6 Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$500.00 |
| | | Houston, TX 77018 | | _ | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| _ | Partner | | | Partner | | of the same |
| 10 | LO Contributor's employer/law firm SBSB 11 Law firm of contributor's s | | | | ous | se (II any) |
| 12 | 2 If contributor is | s a child, law firm of parent(s) (if | f any) | 1 | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/26/2025 | Cochinwala, Fuad Contributor address; City; | State; Zip Code | | | \$2,500.00 |
| | | Sugarland, TX 77479 | | _ | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| L | President Contributor's | employer/law firm | | President Law firm of contributor's sp | 20116 | co (if any) |
| | One step dia | | | Law IIIII of Contributor's Sp | Jous | se (II ally) |
| - | | s a child, law firm of parent(s) (if | f any) | | | |
| | | , | , | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | Ī | Amount of Contribution (\$) |
| | 05/28/2025 | Cokinos Young | | | | \$2,500.00 |
| | Contributor address; City; State; Zip Code | | | | | |
| L | Contributorio | Houston, TX 77010 | | Contributorio Joh Titlo | | |
| | 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) (if | f any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE / | A(J)1 |
|----|----------------------------|---|------------------------|---------------------------------|-------------|---|------------|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | al pages Schedule A(J)1 n: 15/79 Rpt: 19/126 | : |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 1 | r ID (Ethics Commission)81751 | on Filers) |
| 4 | Date 05/23/2025 | 5 Full name of contributor Craft, Hunter 6 Contributor address; City; | out-of-state PAC (ID#: | | 7 Am | ount of Contribution (\$) | \$1,000.00 |
| | | Houston, TX 77019 | | | | | |
| 8 | Contributor's I | Principal Occupation | | 9 Contributor's Job Title | | | |
| | Attorney | | | | | | |
| 10 | | employer/law firm | | 11 Law firm of contributor's sp | oouse (if | any) | |
| _ | Craft Law Fi | | | Craft Law Firm, P.C. | | | |
| 12 | ! If contributor is | s a child, law firm of parent(s) (i | tany) | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Am | ount of Contribution (\$) | |
| | 06/27/2025 | Dale, Michael Contributor address; City; | State; Zip Code | | | | \$250.00 |
| | | Houston, TX 77005 | | | | | |
| | | Principal Occupation | | Contributor's Job Title | | | |
| | Investments | | | Investments | | | |
| | Dale Holding | employer/law firm | | Law firm of contributor's sp | ouse (ii | any) | |
| | | s a child, law firm of parent(s) (i | f anv) | | | | |
| | ii contributor i | s a clina, law iiiii oi parchi(s) (i | i arry) | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Am | ount of Contribution (\$) | |
| | 06/24/2025 | Danna, Marion | | | | | \$2,500.00 |
| | | Contributor address; City; Houston, TX 77081 | | | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | | | |
| | President | | | President | | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oouse (if | any) | |
| | Citywide Inju | ıry and Accident | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | | |
| | | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|---|--|------------------------|------------------------------|--------------------------------------|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 16/79 Rpt: 20/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 05/23/2025 | Dave, Aparna 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$200.00 | |
| | | Houston, TX 77055 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Lawyer | | | Lawyer | | |
| 10 | LO Contributor's employer/law firm TDECU 11 Law firm of contributor's s | | | | oous | e (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 (\$) |
| | 06/27/2025 Davis, Cathy Contributor address; City; State; Zip Code | | | | \$50.00 | |
| | | Houston, TX 77004 | | | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| | retired | | | retired | | |
| | retired | employer/law firm | | Law firm of contributor's sp | oous | e (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#: |) | Τ | Amount of Contribution (\$) |
| | 05/28/2025 | Di Ferrante, Chris | | | | \$250.00 |
| | | Contributor address; City; Houston, TX 77008 | State; Zip Code | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | | |
| | Lawyer | | | Lawyer | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | self | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|--|---|------------------------|------------------------------|--------------------------------------|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 17/79 Rpt: 21/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 05/28/2025 | <u> </u> | | 7 | Amount of Contribution (\$) \$500.00 | |
| | | Houston, TX 77018 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | LO Contributor's employer/law firm McCathern Houston | | | | oous | se (if any) |
| 12 | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | |
| H | Date | Full name of contributor | out-of-state PAC (ID#: | , | T | Amount of Contribution (\$) |
| | 05/13/2025 | Duckers, Sarah Contributor address; City; | <u> </u> | | | \$100.00 |
| | | Bellaire, TX 77401 | | | | |
| | Contributor's Principal Occupation Contributor's Job Title | | | • | | |
| | Lawyer | | | Lawyer | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Sechrist Duc | ckers LLP | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| _ | Date | Full name of contributor | out-of-state PAC (ID#: |) | Τ | Amount of Contribution (\$) |
| | 06/04/2025 | Durrell, Al | | | | \$50.00 |
| | | Contributor address; City; Houston, TX 77009 | State; Zip Code | | | |
| - | Contributor's I | rincipal Occupation | | Contributor's Job Title | <u> </u> | |
| | Lawyer | iniopai Goodpaion | | Lawyer | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Lewis Brisbo | ois Bisgaard & Smith LLP | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTIO | ONS | SCHEDULE A(J)1 |
|---------------------------------|---|--------------------------------------|------------------------|--|---|
| | The Instru | ction Guide explains ho | w to complete this f | form. | 1 Total pages Schedule A(J)1: Sch: 18/79 Rpt: 22/126 |
| 2 | FILER NAME | | | | 3 Filer ID (Ethics Commission Filers) |
| | Miller, Beau | er, Beau A. (The Honorable) | | | 00081751 |
| 4 | Date 05/16/2025 | | | 7 Amount of Contribution (\$) \$500.00 | |
| | | Detroit, MI 48243 | | | |
| 8 | Contributor's | Principal Occupation | | 9 Contributor's Job Title | |
| 10 | O Contributor's employer/law firm 11 Law firm of contributor's s | | | pouse (if any) | |
| 12 | If contributor i | s a child, law firm of parent(s) (if | any) | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/03/2025 Edwards, Spencer | | | \$500.00 | | |
| | | Contributor address; City; \$ | | | |
| | 0 | The Woodlands, TX 773 | 82 | I 0 . 7 | |
| | Attorney | Principal Occupation | | Contributor's Job Title Attorney | |
| | | employer/law firm | | Law firm of contributor's s | nouse (if any) |
| | Hudgins Lav | | | Law iiiii or contributor 3 3 | ouse (ii ariy) |
| | | s a child, law firm of parent(s) (if | any) | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 06/04/2025 | Ellzey, Kherkher, Sanfor | d & Montgomery LLP | | \$1,000.00 |
| | | Contributor address; City; S | State; Zip Code | | |
| | Combulloutoulo | Houston, TX 77006 | | Constribute de Joh Title | |
| | Contributors | Principal Occupation | | Contributor's Job Title | |
| Contributor's employer/law firm | | | | Law firm of contributor's s | pouse (if any) |
| | If contributor i | s a child, law firm of parent(s) (if | any) | | |
| | | | | | |

| | MONET | ARY POLITICAL | 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: 19/79 Rpt: 23/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/25/2025 | 5 Full name of contributorEmergency Healthcare I6 Contributor address; City; | | | 7 | Amount of Contribution (\$) \$5,000.00 |
| | | Houston, TX 77007 | | | | |
| 8 | Contributor's F | Principal Occupation | | 9 Contributor's Job Title | | |
| 10 | 10 Contributor's employer/law firm 11 Law firm of contributor's sp | | | oous | se (if any) | |
| 12 | ! If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Π | Amount of Contribution (\$) |
| | 06/03/2025 | Farah, George Contributor address; City; | State; Zip Code | | | \$1,000.00 |
| | | Houston, TX 77006 | | 1 | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| attorney | | | , | | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Farah Law C | · | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 05/29/2025 | Farrar, Kyle | _ | | | \$2,500.00 |
| Contributor address; City; State; Zip Code | | | • | | | |
| | Contributorio | Houston, TX 77008 Principal Occupation | | Contributorio Joh Titlo | | |
| | Lawyer | Principal Occupation | | Contributor's Job Title Lawyer | | |
| | | emnlover/law firm | | Law firm of contributor's sp | יוח | se (if any) |
| Contributor's employer/law firm Kaster, Lynch, Farrar & Ball Law firm of contributor's s | | | | Law iiiii oi contributoi o o | Jou. | se (ii dily) |
| | | s a child, law firm of parent(s) (if | any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|---|--|------------------------|--|--------------------------------------|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 20/79 Rpt: 24/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 05/15/2025 | 5/2025 Feldman, Cris 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$500.00 | |
| | | Houston, TX 77098 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | 10 Contributor's employer/law firm Feldman & Feldman PC | | | oous | e (if any) | |
| 12 | ! If contributor is | s a child, law firm of parent(s) (i | f any) | I . | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/24/2025 | Feldman, Cris Contributor address; City; | State; Zip Code | | | \$500.00 |
| | | Houston, TX 77098 | | I | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| _ | Attorney | employer/law firm | | Attorney Law firm of contributor's sp | 20110 | o (if any) |
| | Feldman & F | | | Law littl of contributors sp | Jous | e (ii aliy) |
| | | s a child, law firm of parent(s) (i | f anv) | | | |
| | | , , , , , , , , , , , , , , , , , , , | , , | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | Τ | Amount of Contribution (\$) |
| | 06/23/2025 | Fibich, Tommy Contributor address; City; | State; Zip Code | | | \$2,500.00 |
| | | Houston, TX 77005 | | | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | | on Copeland Briggs | | | | |
| | it contributor is | s a child, law firm of parent(s) (i | r any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL (| CONTRIBUTIO | DNS | | SCHEDULE A(J)1 |
|----|--|--|-------------------------|------------------------------|--|---|
| | The Instru | ction Guide explains how | v to complete this f | orm. | 1 | Total pages Schedule A(J)1: Sch: 21/79 Rpt: 25/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 05/12/2025 | | | 7 | Amount of Contribution (\$) \$1,000.00 | |
| | | Houston, TX 77010 | | | | |
| 8 | Contributor's F | Principal Occupation | | 9 Contributor's Job Title | | |
| 10 | 10 Contributor's employer/law firm 11 Law firm of contributor's sp | | | oous | se (if any) | |
| 12 | 2 If contributor is | s a child, law firm of parent(s) (if a | any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) |
| | 06/04/2025 | Foley Lardner LLP Texas Contributor address; City; Si Dallas, TX 75201 | | | | \$200.00 |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Continuator 5 i | molpai Geografion | | Contributor 3 dob Title | | |
| | Contributor's 6 | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | If contributor is | s a child, law firm of parent(s) (if a | any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) |
| | 05/12/2025 | Foster Yarborough PLLC Contributor address; City; Si | tate; Zip Code | | | \$1,000.00 |
| | | Houston, TX 77002 | | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Contributor's e | 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 a | any) | I | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
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| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 22/79 Rpt: 26/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 05/23/2025 | 5 Full name of contributorFox, Jan6 Contributor address; City; | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) \$1,000.00 |
| | | Houston, TX 77005 | | | | |
| 8 | Contributor's I | Principal Occupation | | 9 Contributor's Job Title | | |
| | attorney | | | attorney | | |
| 10 | 10 Contributor's employer/law firm Jan Woodward Fox, PLC 11 Law firm of contributor's sp | | | | oous | e (if any) |
| 12 | | s a child, law firm of parent(s) (i | f any) | 1 | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: | 1 | Т | Amount of Contribution (\$) |
| | 05/13/2025 Garcia, Juan Contributor address; City; State; Zip Code | | | | \$2,500.00 | |
| | | Katy, TX 77494 | | | | |
| | Contributor's Principal Occupation Contributor's Job Title | | | | | |
| Attorney/Partner Attorney/Partne | | | Attorney/Partner | | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Johnson Ga | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | fany) | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | Ī | Amount of Contribution (\$) |
| | 06/04/2025 | Gardner, Andrew | | | | \$100.00 |
| | | Contributor address; City; Houston, TX 77092 | State; Zip Code | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Lawyer | molpai Goodpailon | | Lawyer | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | A. K. Gardne | er Law | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
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| | The Instruction Guide explains how to complete this form. | | | | | Total pages Schedule A(J)1: Sch: 23/79 Rpt: 27/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | 4 Date 05/12/2025 | | 7 | Amount of Contribution (\$) \$100.00 | | |
| | | Houston, TX 77070 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | attorney | | | attorney | | |
| 10 | Contributor's e | employer/law firm | | 11 Law firm of contributor's sp | oou | se (if any) |
| 12 | | s a child, law firm of parent(s) (i | f any) | | | |
| | Date | Full name of contributor | D out of state DAC (ID#s | , | _ | Amount of Contribution (\$) |
| | 05/12/2025 | Gibbs, Robin Contributor address; City; | out-of-state PAC (ID#: | | | \$500.00 |
| | | Houston, TX 77002 | | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | oou | se (if any) |
| | Gibbs & Bru | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | T | Amount of Contribution (\$) |
| | 05/22/2025 | Gibbs, Robin | _ | | | \$500.00 |
| | | Contributor address; City; Houston, TX 77002 | State; Zip Code | | | |
| | Contributor's I | I Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Attorney | | | Attorney | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oou | se (if any) |
| | Gibbs & Bru | ns LLP | | | | |
| | 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 | 1 | otal pages Schedule A(J): ch: 24/79 Rpt: 28/126 | 1: | | |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 1 | ler ID (Ethics Commissi 0081751 | ion Filers) |
| 4 | 4 Date 06/06/2025 5 Full name of contributor out-of-state PAC (ID#:) Gibson, Jason 6 Contributor address; City; State; Zip Code | | 7 At | mount of Contribution (\$) | \$1,000.00 | | |
| | | HOUSTON, TX 77098 | | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | | |
| | Attorney | | | Attorney | | | |
| 10 | | employer/law firm | | 11 Law firm of contributor's sp | oouse (| if any) | |
| L | The Gibson | | | The Gibson Law Firm | | | |
| 12 | t it contributor is | s a child, law firm of parent(s) (i | r any) | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | 1A | mount of Contribution (\$) | |
| | 06/04/2025 Godwin, Noah Contributor address; City; State; Zip Code | | | | | \$1,000.00 | |
| | Contributor's I | Houston, TX 77005 Principal Occupation | | Contributor's Job Title | | | |
| | Doctor | Thiopai Occupation | | Doctor | | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oouse (| if any) | |
| | Dynamic Pa | in Texas | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | | |
| H | Date | Full name of contributor | out-of-state PAC (ID#: |) | I Aı | mount of Contribution (\$) | |
| | 06/04/2025 | Gonzales, Natalie | | , | | (+) | \$500.00 |
| | | Contributor address; City; Houston, TX 77018 | State; Zip Code | | | | |
| - | Contributor's I | Principal Occupation | | Contributor's Job Title | <u> </u> | | |
| | Attorney | Timopai Coodpaion | | Attorney | | | |
| | | employer/law firm | | Law firm of contributor's sp | oouse (| if any) | |
| | Yetter Colen | | | Hinojosa Law | · | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | | |
| | | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTIO | ONS | | SCHEDULE A(J)1 |
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| The Instruction Guide explains how to complete this form. | | | | | 1 | Total pages Schedule A(J)1: Sch: 25/79 Rpt: 29/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | 4 Date 06/04/2025 5 Full name of contributor out-of-state PAC (ID#:) Goodwill, Robert 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$5,000.00 | | |
| | | Sugar Land, TX 77479 | | | | |
| 8 | Contributor's I | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | Contributor's 6 The West La | employer/law firm aw Firm | | 11 Law firm of contributor's sp | oous | se (if any) |
| 12 | ! If contributor is | s a child, law firm of parent(s) (if | any) | I | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/04/2025 | Goolsby, Edward Contributor address; City; | State; Zip Code | | | \$100.00 |
| | | Houston, TX 77010 | | T | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| _ | Attorney | employer/law firm | | Attorney Law firm of contributor's sp | 2011 | on (if any) |
| | | itsanos & Mensing PLLC | | Law littl of contributors sp | Jous | se (II aliy) |
| | | s a child, law firm of parent(s) (if | any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | T | Amount of Contribution (\$) |
| | 06/04/2025 | Goolsby, Edward Contributor address; City; | State; Zip Code | | | \$1,000.00 |
| | | Houston, TX 77010 | | | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | | itsanos & Mensing PLLC s a child, law firm of parent(s) (if | anv) | | | |
| | Ti continuator i | o a crima, raw inini or parent(o) (ii | uity) | | | |
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| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE | A(J)1 |
|----|--|---|------------------------|---------------------------------|-------------|---|------------|
| | The Instruction Guide explains how to complete this form. | | | | | pages Schedule A(J)1 26/79 Rpt: 30/126 | : |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 1 | ID (Ethics Commissi 31751 | on Filers) |
| 4 | 4 Date 06/16/2025 5 Full name of contributor out-of-state PAC (ID#:) Green, Manuel 6 Contributor address; City; State; Zip Code | | 7 Amou | unt of Contribution (\$) | \$2,500.00 | | |
| | | Dallas, TX 75240 | | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | | |
| _ | Lawyer | | | Lawyer | | | |
| 10 | Meg | employer/law firm | | 11 Law firm of contributor's sp | oouse (if a | ny) | |
| 12 | | s a child, law firm of parent(s) (i | f anv) | | | | |
| | - ii donandator ii | o a orma, iaw iiiii or parom(o) (i | | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amou | unt of Contribution (\$) | |
| | 06/17/2025 | Greene, Todd | | | | (,, | \$1,000.00 |
| | | Contributor address; City; | State; Zip Code | | | | |
| | | Houston, TX 77082 | | | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | | | |
| | CEO | | | CEO | | | |
| | | employer/law firm | | Law firm of contributor's sp | oouse (if a | ny) | |
| | Memorial Mi | | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | | |
| H | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amou | unt of Contribution (\$) | |
| | 06/04/2025 | Griffin, Bret | _ | | | | \$500.00 |
| | | Contributor address; City; | State; Zip Code | | | | |
| | | Houston, TX 77019 | | 1 | | | |
| | | Principal Occupation | | Contributor's Job Title | | | |
| | Lawyer | omployer/low firm | | Lawyer | acusa (if a | m.d | |
| | Buzbee | employer/law firm | | Law firm of contributor's sp | ouse (ii a | ny) | |
| - | | s a child, law firm of parent(s) (i | f any) | | | | |
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| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
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| | The Instruction Guide explains how to complete this form. | | | | | Total pages Schedule A(J)1: Sch: 27/79 Rpt: 31/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | 4 Date 05/12/2025 5 Full name of contributor out-of-state PAC (ID#:) 7 Gutierrez, Alfredo R. 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$250.00 | | |
| | | Houston, TX 77004-402 | 7 | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Atty | | | Atty | | |
| 10 | | employer/law firm Inagement Corp | | 11 Law firm of contributor's sp | oous | e (if any) |
| 12 | | s a child, law firm of parent(s) (if | any) | <u> </u> | | |
| H | Date | Full name of contributor | out-of-state PAC (ID#: | | Т | Amount of Contribution (\$) |
| | 06/25/2025 | Gutierrez, Andrea Contributor address; City; | <u> </u> | | | \$5,000.00 |
| | | Houston, TX 77023 | | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | • | |
| | Associate At | torney | | Associate Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | | uyen LawFirm | | | | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | T | Amount of Contribution (\$) |
| | 05/12/2025 | HOROWITZ, DANIEL | _ | | | \$1,000.00 |
| | | Contributor address; City; Houston, TX 77002 | State; Zip Code | | | |
| | Contributor's F | rincipal Occupation | | Contributor's Job Title | <u> </u> | |
| | Attorney | | | Attorney | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | The Law Off | ice of Daniel D. Horowitz, III | PC | | | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | |
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| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE | A(J)1 |
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| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | otal pages Schedule A(J)1 ch: 28/79 Rpt: 32/126 | Ŀ |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 1 | er ID (Ethics Commissi 0081751 | on Filers) |
| 4 | 4 Date 05/23/2025 5 Full name of contributor | | 7 An | nount of Contribution (\$) | \$2,500.00 | | |
| | | SUGAR LAND, TX 7747 | 79-3822 | | | | |
| 8 | Contributor's F | Principal Occupation | | 9 Contributor's Job Title | | | |
| | Attorney | | | Attorney | | | |
| 10 | Contributor's e The Hadi La | employer/law firm | | 11 Law firm of contributor's sp | oouse (i | f any) | |
| 12 | | s a child, law firm of parent(s) (if | · anv) | | | | |
| | . II continuator is | o a orma, law iiiii or parerido) (ii | any) | | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | An | nount of Contribution (\$) | |
| | 05/12/2025 | Hall, Benjamin Contributor address; City; | <u> </u> | | | | \$1,000.00 |
| | | Houston, TX 77024 | | | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | | | |
| | Lawyer | | | Lawyer | | | |
| | | employer/law firm | | Law firm of contributor's sp | oouse (i | f any) | |
| | Hall Law Gro | | | | | | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | | |
| H | Date | Full name of contributor | out-of-state PAC (ID#: |) | An | nount of Contribution (\$) | |
| | 05/27/2025 | Hanszen Laporte LLP | _ | | | | \$500.00 |
| | | Contributor address; City; Houston, TX 77079 | State; Zip Code | | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | <u> </u> | | |
| | Continuation of | imolpai Godapation | | Contributor 5 Cos Title | | | |
| | Contributor's 6 | employer/law firm | | Law firm of contributor's sp | oouse (i | f any) | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | I . | | | |
| | | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
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| | The Instruction Guide explains how to complete this form. | | | | | Total pages Schedule A(J)1: Sch: 29/79 Rpt: 33/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 1 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | | | 7 | Amount of Contribution (\$) \$1,000.00 | | |
| | | Houston, TX 77005 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | | employer/law firm n & Associates | | 11 Law firm of contributor's sp | oouse | e (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 (\$) |
| | 06/30/2025 | Contributor address; City; | | | | \$1,000.00 |
| | | Corpus Christi, TX 7840 | 1 | I 0 17 1 1 1 77 | | |
| | Attorney | Principal Occupation | | Contributor's Job Title Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | 20116 | a (if any) |
| | Sico Hoelscl | • • | | Law iiiii oi continuatoi 3 3 | Jouse | s (ii carly) |
| | | s a child, law firm of parent(s) (i | f any) | | | |
| - | Date | Full name of contributor | out-of-state PAC (ID#: |) | Π | Amount of Contribution (\$) |
| | 05/29/2025 | Hart, Jim | | | | \$1,000.00 |
| | | Contributor address; City; Houston, TX 77017 | State; Zip Code | | | |
| | Contributor's F | I Principal Occupation | | Contributor's Job Title | | |
| | Partner | | | Partner | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oouse | e (if any) |
| | Williams Har | t & Boundas, LLP | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | fany) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
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| | The Instruction Guide explains how to complete this form. | | | | | al pages Schedule A(J)1: h: 30/79 Rpt: 34/126 |
| 2 | FILER NAME | | 3 File | er ID (Ethics Commission Filers) | | |
| | Miller, Beau | A. (The Honorable) | | | 00 | 081751 |
| 4 | Date | out-of-state PAC (ID#:) | | 7 Am | ount of Contribution (\$) | |
| | 05/22/2025 | Hataway-Cone', Misty | | | | \$1,000.00 |
| | | 6 Contributor address; City; | State; Zip Code | | | |
| | | Houston, TX 77007 | | | | |
| 8 | Contributor's | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | Contributor's | employer/law firm | | 11 Law firm of contributor's s | pouse (i | any) |
| | Cone' PLLC | | | Cone' PLLC | | |
| 12 | If contributor i | s a child, law firm of parent(s) (| if any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | An | ount of Contribution (\$) |
| | 05/30/2025 | Havins, John | _ | | | \$200.00 |
| | | Contributor address; City; | State; Zip Code | | " | |
| | | Houston, TX 77019 | | | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| | Trial attorne | у | | Trial attorney | | |
| | | employer/law firm | | Law firm of contributor's s | pouse (i | any) |
| | Havins & As | sociates, PC | | | | |
| | If contributor i | s a child, law firm of parent(s) (| if any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | An | ount of Contribution (\$) |
| | 05/21/2025 | Haynes and Boone PAG | | | | \$1,000.00 |
| | | Contributor address; City; | State; Zip Code | | " | |
| | | | | | | |
| | | Dallas, TX 75201 | | | | |
| | Contributor's | Principal Occupation | | Contributor's Job Title | | |
| | Contributor's | employer/law firm | | Law firm of contributor's s | pouse (i | any) |
| | If contributor i | s a child, law firm of parent(s) (| if any) | | | |
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| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|---|--|------------------------|--|----------|---|
| | The Instruction Guide explains how to complete this form. | | | | | Total pages Schedule A(J)1: Sch: 31/79 Rpt: 35/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | 4 Date 06/25/2025 5 Full name of contributor out-of-state PAC (ID#:) Hendrickson, Bradford 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$5,000.00 | | |
| | | Houston, TX 77023 | | | | |
| 8 | Contributor's I | Principal Occupation | | 9 Contributor's Job Title | | |
| | Senior Attori | | | Senior Attorney | | |
| 10 | | employer/law firm uyen Injury Lawyers | | 11 Law firm of contributor's sp | oous | se (if any) |
| 12 | | s a child, law firm of parent(s) (i | f anv) | | | |
| | | , | ,, | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | Т | Amount of Contribution (\$) |
| | 05/28/2025 | Henke, Charlie | | | | \$500.00 |
| | | Contributor address; City; | State: Zip Code | | 1 | |
| | | , | , , , | | | |
| | | | | | | |
| | | Houston, TX 77019 | | | | |
| _ | Contributor's I | Principal Occupation | | Contributor's Job Title | _ | |
| | Managing Pa | | | Managing Partner | | |
| - | | employer/law firm | | Law firm of contributor's sp | วดนะ | se (if any) |
| | Henke & Wil | | | Thompson Coe | | |
| - | 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#: |) | Т | Amount of Contribution (\$) |
| | 06/04/2025 | Herrera, Lauren | | | | \$100.00 |
| | | Contributor address; City; | State; Zip Code | | 1 | |
| | | | | | | |
| | | | | | | |
| | | Houston, TX 77008 | | | | |
| | Contributor's I | rincipal Occupation | | Contributor's Job Title | <u> </u> | |
| | Lawyer | | | Lawyer | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Herrera Law | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
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| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|--|--|------------------------|---|----------|--|
| | The Instru | ction Guide explains ho | 1 | Total pages Schedule A(J)1: Sch: 32/79 Rpt: 36/126 | | |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | 4 Date 06/04/2025 5 Full name of contributor out-of-state PAC (ID#:) 7 Hill, Brett 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$500.00 | | |
| | | Houston, TX 77006 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | Contributor's e Gibson Hill F | employer/law firm PC | | 11 Law firm of contributor's sp | oous | se (if any) |
| 12 | ! If contributor i | s a child, law firm of parent(s) (i | f any) | • | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Ī | Amount of Contribution (\$) |
| | 06/24/2025 | Hogan, Ben Contributor address; City; Dallas, TX 75211 | State; Zip Code | | | \$5,000.00 |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Lead Market | | | Lead Marketer | | |
| - | | employer/law firm | | Law firm of contributor's sp | oous | se (if anv) |
| | MRI Centers | of Texas | | | | • |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | T | Amount of Contribution (\$) |
| | 06/03/2025 | Hollingsworth, Lara Contributor address; City; | State; Zip Code | | | \$500.00 |
| | | Houston, TX 77027 | | _ | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | | ard, & Spalding, LLP | f a.m. A | | | |
| | ii contributor i | s a child, law firm of parent(s) (i | rany) | | | |
| | | | | | | |

| | 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: 33/79 Rpt: 37/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/03/2025 | 5 Full name of contributor Houston, Samuel6 Contributor address; City; S | out-of-state PAC (ID#:_State; Zip Code |) | 7 | Amount of Contribution (\$) \$250.00 |
| | | houston, TX 77041 | | | | |
| 8 | | 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) |
| 12 | | s a child, law firm of parent(s) (if | any) | | | |
| | | | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/03/2025 Hughes, Carlos Contributor address; City; State; Zip Code | | | • | \$250.00 | |
| | | Pearland, TX 77581 | | | | |
| | Contributor's Principal Occupation Contributor's Job Title | | | | | |
| | partner | | | partner | | |
| | | employer/law firm | | Law firm of contributor's sp | ous | se (if any) |
| | The Hughes | Law Firm | | The Hughes Law Firm | | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| H | Date | Full name of contributor | out-of-state PAC (ID#: |) | Π | Amount of Contribution (\$) |
| | 06/17/2025 | Hunton Andrews Kurth T | _ | | | \$2,500.00 |
| | | Contributor address; City; S | State; Zip Code | | • | |
| | | Houston, TX 77002 | | • | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | | |
| | Contributor's e | 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) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL CO | NTRIBUTIC | ONS | SCHEDULE A(J)1 |
|----|--|--|-------------------------|------------------------------|---|
| | The Instru | ction Guide explains how to | complete this fo | orm. | 1 Total pages Schedule A(J)1: Sch: 34/79 Rpt: 38/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/27/2025 | | | | 7 Amount of Contribution (\$) \$250.00 |
| 8 | B Contributor's Principal Occupation 9 Contributor's Job Title | | | | |
| | retired | | | retired | |
| 10 | O Contributor's employer/law firm 11 Law firm of contributor's spretired | | | oouse (if any) | |
| 12 | If contributor is | s a child, law firm of parent(s) (if any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ | | Amount of Contribution (\$) |
| | 05/23/2025 Itkin, Jason Contributor address; City; State; Zip Code Houston, TX 77007 | | | \$5,000.00 | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | |
| | Attorney | morpai occupation | | Attorney | |
| | | employer/law firm | | Law firm of contributor's sp | oouse (if any) |
| | Arnold & Itki | n | | | |
| | If contributor is | s a child, law firm of parent(s) (if any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| | 06/04/2025 | Jackson, Drews and Boanerg Contributor address; City; State; Houston, TX 77055 | | | \$500.00 |
| | Contributor's I | I Principal Occupation | | Contributor's Job Title | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | pouse (if any) |
| | If contributor is | s a child, law firm of parent(s) (if any) | | | |
| | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|--|--|------------------------|-----------------------------------|------------|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 35/79 Rpt: 39/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/27/2025 | 5 Full name of contributor Kerlin, Paul6 Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$500.00 |
| | | Houston, TX 77025 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| _ | Shareholder | | | Shareholder | | |
| 10 | Contributor's 6 Greenberg 1 | employer/law firm Trauria | | 11 Law firm of contributor's sp | oous | se (If any) |
| 12 | | s a child, law firm of parent(s) (i | f any) | <u> </u> | | |
| | | | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 05/12/2025 Kherkher, Steve Contributor address; City; State; Zip Code | | | | \$5,000.00 | |
| | | Houston, TX 77098 | | | | |
| | Contributor's Principal Occupation Contributor's Job Title | | | _ | | |
| | Attorney | | | Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Kherkher Ga | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | fany) | | | |
| H | Date | Full name of contributor | out-of-state PAC (ID#: |) | Π | Amount of Contribution (\$) |
| | 06/20/2025 | Khwaja, Omar | | | | \$2,500.00 |
| | | Contributor address; City; | State; Zip Code | | | |
| | | Houston, TX 77024 | | T | | |
| | Contributor's I Lawyer | Principal Occupation | | Contributor's Job Title Lawyer | | |
| _ | | employer/law firm | | Law firm of contributor's sp | חחופ | se (if any) |
| | | ices of Omar Khawaja | | Law iiiii oi contributoi 5 5 | Jou | oc (ii uriy) |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|--|--|------------------------|------------------------------|------------|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | otal pages Schedule A(J)1: ch: 36/79 Rpt: 40/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 1 | iler ID (Ethics Commission Filers) 0081751 |
| 4 | Date 05/28/2025 | 5 Full name of contributor Kidd, Donald6 Contributor address; City; | out-of-state PAC (ID#: | | 7 A | mount of Contribution (\$) \$1,000.0 |
| | | Houston, TX 77056 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | LO Contributor's employer/law firm Perdue and Kidd LLP 11 Law firm of contributor's s | | | | oouse | (if any) |
| 12 | If contributor is | s a child, law firm of parent(s) (if | any) | 1 | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | A | mount of Contribution (\$) |
| | 06/27/2025 Kieschnick, Jonathan Contributor address; City; State; Zip Code Houston, TX 77058 | | | | | \$1,500.0 |
| _ | Contributor's Principal Occupation Contributor's Job Title | | | | | |
| | Trial Lawyer Trial Lawyer | | | | | |
| | | employer/law firm | | Law firm of contributor's sp | ouse | (if any) |
| | Jonathan C | Kieschnick | | | | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| = | Date | Full name of contributor | out-of-state PAC (ID#: |) | A | mount of Contribution (\$) |
| | 06/24/2025 Killingsworth, Michael Contributor address; City; State; Zip Code | | | | \$200.0 | |
| | | Houston, TX 77010 | | | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | • | |
| | Lawyer | | | Lawyer | | |
| | | employer/law firm | | Law firm of contributor's sp | oouse | (if any) |
| | | itsanos & Mensing PLLC | | | | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL CON | NTRIBUTIC | DNS | | SCHEDULE | A(J)1 |
|--|--|---|-------------------------|---------------------------------|-------------------|---|------------|
| | The Instru | ction Guide explains how to o | complete this f | orm. | | ages Schedule A(J)1 7/79 Rpt: 41/126 | L: |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 Filer ID 000817 | (Ethics Commissi 751 | on Filers) |
| 4 | Date 05/17/2025 | cat of state 1710 (127). | | | 7 Amount | of Contribution (\$) | \$1,000.00 |
| 8 | Contributor's F | I Principal Occupation | | 9 Contributor's Job Title | <u> </u> | | |
| | | | | Atty | | | |
| 10 | Contributor's | employer/law firm | | 11 Law firm of contributor's sp | ouse (if any) |) | |
| | The Kim Lav | • • | | The Kim Law Firm | | | |
| 12 | If contributor is | s a child, law firm of parent(s) (if any) | | | | | |
| | Date | Full name of contributor 0 | out-of-state PAC (ID#:_ |) | Amount | of Contribution (\$) | |
| | 06/04/2025 Kishinevsky, Leo Contributor address; City; State; Zip Code Houston, TX 77040 | | | | | | \$150.00 |
| Contributor's Principal Occupation Contributor's Job Title | | | | <u> </u> | | | |
| | Attorney | | | Attorney | | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | ouse (if any) |) | |
| | Kishinevsky | Law Firm | | Kishinevsky Law Firm | | | |
| | If contributor is | s a child, law firm of parent(s) (if any) | | | | | |
| | Date | Full name of contributor o | out-of-state PAC (ID#:_ |) | Amount | of Contribution (\$) | |
| | 05/14/2025 | Kretzer, Seth Contributor address; City; State; Z Houston, TX 77002 | čip Code | | | | \$250.00 |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | | | |
| | lawyer | | | lawyer | | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | ouse (if any) |) | |
| | Law Office o | of Seth Kretzer | | | | | |
| | If contributor is | s a child, law firm of parent(s) (if any) | | | | | |
| | | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A | (J)1 |
|--|--|---|-------------------------|--------------------------------|-----------------|--|----------|
| | The Instru | ction Guide explains ho | ow to complete this | form. | 1 | ges Schedule A(J)1: /79 Rpt: 42/126 | |
| 2 | FILER NAME | | | | 3 Filer ID | (Ethics Commission | Filers) |
| | Miller, Beau | A. (The Honorable) | | | 000817 | 51 | |
| 4 | Date 05/30/2025 | 5 Full name of contributor Krock, Rapp6 Contributor address; City; | out-of-state PAC (ID#: |) | 7 Amount | of Contribution (\$) | \$250.00 |
| | | Houston, TX 77056 | | | | | |
| 8 | Contributor's | ontributor's Principal Occupation AW FIRM 9 Contributor's Job Title LAW FIRM | | | | | |
| 10 | | employer/law firm | | 11 Law firm of contributor's s | spouse (if any) | | |
| | Rapp & Kroo | | | | | | |
| 12 | ! If contributor i | s a child, law firm of parent(s) (| if any) | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount | of Contribution (\$) | |
| | 05/26/2025 Kumar Agarwal, Neal | | | | | \$500.00 | |
| | Contributor address; City; State; Zip Code | | | | | | |
| | | | | | | | |
| | | Houston, TX 77024 | | | | | |
| Contributor's Principal Occupation Contribut | | | Contributor's Job Title | 1 | | | |
| | Doctor | | | Doctor | | | |
| | Contributor's | employer/law firm | | Law firm of contributor's s | spouse (if any) | | |
| | Baylor St. Lu | uke's Medical Center | | | | | |
| | If contributor i | s a child, law firm of parent(s) (| if any) | • | | | |
| _ | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount | of Contribution (\$) | |
| | 06/04/2025 | Kwok, Rob | | | | 9 | 5,000.00 |
| | | Contributor address; City; | State; Zip Code | | " | | |
| | | | | | | | |
| | | Houston, TX 77024 | | | | | |
| | Contributor's | Principal Occupation | | Contributor's Job Title | | | |
| | Attorney | | | Attorney | | | |
| | | employer/law firm | | Law firm of contributor's s | spouse (if any) | | |
| | Kwok Danie | I Ltd LLP | | | | | |
| | If contributor i | s a child, law firm of parent(s) (| if any) | | | | |
| | | | | | | | |
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| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|--|---|-------------------------|----------------------------------|----------|---|
| | The Instru | ction Guide explains ho | ow to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 39/79 Rpt: 43/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/26/2025 | 5 Full name of contributor Kwon, Chris6 Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$470.00 |
| | | Pearland, TX 77584 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | LO Contributor's employer/law firm Kwon Law, PLLC | | | | oous | se (if any) |
| 12 | | s a child, law firm of parent(s) (i | f any) | I | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/04/2025 Lannie, Scott Contributor address; City; State; Zip Code | | | - | \$500.00 | |
| | Baytown, TX 77521 Contributor's Principal Occupation Contributor's Job Title | | | | | |
| | Attorney | Principal Occupation | | Contributor's Job Title Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | 2011 | co (if any) |
| | | Scott C Lannie | | Law iiiii oi continuatoi 3 3 | Jou | se (ii diiy) |
| | | s a child, law firm of parent(s) (i | f any) | 1 | | |
| H | Date | Full name of contributor | out-of-state PAC (ID#: |) | _ | Amount of Contribution (\$) |
| | 06/27/2025 | Lanza, Nick | out of state 1 AC (ID#. | | | \$2,000.00 |
| | Contributor address; City; State; Zip Code Bellaire, TX 77401 | | | | • | |
| | Contributor's I | I Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Lawyer | | | Lawyer | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Lanza Law F | Firm | | Lanza Law 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 how to complete this | form. | 1 Total pages Schedule A(J)1: Sch: 40/79 Rpt: 44/126 | | |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081751 | | |
| 4 | Date 05/17/2025 | Full name of contributor out-of-state PAC (ID# Lapidus, Mark Contributor address; City; State; Zip Code Houston, TX 77057 | 7 Amount of Contribution (\$) \$500.00 | | | |
| 8 | Contributor's I | I Principal Occupation | 9 Contributor's Job Title | <u> </u> | | |
| | Attorney | | | | | |
| 10 | O Contributor's employer/law firm Lapidus Knudsen PC 11 Law firm of contributor's sp | | | oouse (if any) | | |
| 12 | If contributor i | s a child, law firm of parent(s) (if any) | | | | |
| | Date | Full name of contributor out-of-state PAC (ID# | :) | Amount of Contribution (\$) | | |
| | 05/29/2025 Law Office of Domingo Garcia LLP Contributor address; City; State; Zip Code Dallas, TX 75243 | | | \$2,500.00 | | |
| Contributor's Principal Occupation Contributor's Job Title | | | | | | |
| | | . | | | | |
| | Contributor's | employer/law firm | Law firm of contributor's sp | pouse (if any) | | |
| | If contributor i | s a child, law firm of parent(s) (if any) | | | | |
| | Date | Full name of contributor out-of-state PAC (ID# | :) | Amount of Contribution (\$) | | |
| | 06/25/2025 Lawrence, Macy Contributor address; City; State; Zip Code Houston, TX 77008 | | | \$1,000.00 | | |
| | Contributor's I | Principal Occupation | Contributor's Job Title | | | |
| | Owner | | Owner | | | |
| | | employer/law firm | Law firm of contributor's sp | oouse (if any) | | |
| | REFORM CHIROPRACTIC | | | | | |
| | If contributor i | s a child, law firm of parent(s) (if any) | | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|-------------------|--|---|------------------------|---------------------------------|--------------------------------------|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 41/79 Rpt: 45/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 05/29/2025 | 9/2025 Layrisson, Louie 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$500.00 | |
| | | Houston, TX 77008 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | - | | | Attorney | | |
| 10 | | employer/law firm | | 11 Law firm of contributor's sp | oous | se (if any) |
| _ | Baker Botts | | | Serpe Andrews PLLC | | |
| 12 | ! If contributor is | s a child, law firm of parent(s) (i | fany) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/04/2025 Lee, Daniel Contributor address; City; State; Zip Code | | | | \$500.00 | |
| Houston, TX 77002 | | | | | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | | |
| | Lawyer | | | Lawyer | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | C y lee legal | <u> </u> | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | T | Amount of Contribution (\$) |
| | 06/25/2025 | Lee, Joshua | _ | | | \$5,000.00 |
| | | Contributor address; City; Houston, TX 77055 | State; Zip Code | | | |
| - | Contributor's F | I Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Trial lawyer | | | Trial lawyer | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Armstrong L | ee & Baker LP | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|--|---|--|------------------------|-------------------------------|-------------|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 42/79 Rpt: 46/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/25/2025 | 5 Full name of contributor Lee, Julie6 Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$5,000.00 |
| | | Houston, TX 77055 | | | | |
| 8 | Contributor's F | ontributor's Principal Occupation AHM 9 Contributor's Job Title SAHM | | | | |
| 10 | LO Contributor's employer/law firm 11 Law firm of contributor's sp | | | oous | se (if any) | |
| | SAHM | | | Armstrong Lee & Baker | LP | • |
| 12 | ! If contributor i | s a child, law firm of parent(s) (if | any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Π | Amount of Contribution (\$) |
| | 05/29/2025 Licausi, Philippe Contributor address; City; State; Zip Code Houston, TX 77006 | | | | | \$500.00 |
| Contributor's Principal Occupation Contributor's Job Title | | | | | | |
| | Hairstylist | -Tiricipai Occupation | | Hairstylist | | |
| | - | employer/law firm | | Law firm of contributor's sp | 2011 | co (if any) |
| | Balmain Sal | | | Law iiiiii oi continuttoi 3 3 | Jou | se (ii diiy) |
| | | s a child, law firm of parent(s) (if | any) | | | |
| | | | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 05/21/2025 Lopez, Jose Contributor address; City; State; Zip Code Houston, TX 77007 | | | | | \$500.00 |
| - | Contributor's I | rincipal Occupation | | Contributor's Job Title | _ | |
| | Attorney | inioipai o coapation | | Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Jose R. Lope | | | · · | | |
| | | s a child, law firm of parent(s) (if | any) | 1 | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE | A(J)1 |
|----|---|---|------------------------|------------------------------|-------------|--|------------|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | al pages Schedule A(J) n: 43/79 Rpt: 47/126 | l: |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 1 | r ID (Ethics Commissi 081751 | on Filers) |
| 4 | Date 05/12/2025 | Full name of contributor Lowenberg, Mike Contributor address; City; | out-of-state PAC (ID#: | | 7 Am | ount of Contribution (\$) | \$5,000.00 |
| | | Katy, TX 77494 | | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | | |
| | Attorney | | | Attorney | | | |
| 10 | .0 Contributor's employer/law firm Lowenberg Law Firm, PLLC | | | | oouse (if | any) | |
| 12 | | s a child, law firm of parent(s) (i | f anv) | | | | |
| | | o a oa, iam o. paro(o) (. | , | | | | |
| H | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amo | ount of Contribution (\$) | |
| | 06/27/2025 Loya, Joseph Contributor address; City; State; Zip Code | | | | | \$1,500.00 | |
| | | Houston, TX 77096 | | | | | |
| | Contributor's Principal Occupation Contributor's Job Title | | | <u> </u> | | | |
| | Attorney | | | Attorney | | | |
| | | employer/law firm | | Law firm of contributor's sp | oouse (if | any) | |
| | Kwok Daniel | | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | fany) | | | | |
| = | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amo | ount of Contribution (\$) | |
| | 06/25/2025 | Magarin, Odalys | _ | | | | \$5,000.00 |
| | | Contributor address; City; Houston, TX 77023 | State; Zip Code | | | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | <u> </u> | | |
| | Associate At | · | | Associate Attorney | | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | ouse (if | any) | |
| | Pusch & Ng | uyen Law Firm | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | | |
| | | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTIO | ONS | | SCHEDULE A(J)1 |
|----|---|--|------------------------|--------------------------------------|------------|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 44/79 Rpt: 48/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/05/2025 | 5 Full name of contributorMahendru, Ashish6 Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$1,000.00 |
| | | Houston, TX 77008 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | 10 Contributor's employer/law firm Mahendru, PC 11 Law firm of contributor's s | | | | oous | se (if any) |
| 12 | ! If contributor is | s a child, law firm of parent(s) (if | any) | 1 | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 05/12/2025 Manne, Neal Contributor address; City; State; Zip Code Houston, TX 77019 | | | | \$5,000.00 | |
| | | | | | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| | lawyer Contributor's | employer/law firm | | lawyer Law firm of contributor's sp | 2011 | oo (if any) |
| | Susman God | | | Law iiiii oi continutoi 3 3 | Jou. | se (ii aiiy) |
| | | s a child, law firm of parent(s) (if | anv) | | | |
| | | , | - 3, | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | Τ | Amount of Contribution (\$) |
| | 05/12/2025 | Marcos, Jr., Javier | | | | \$5,000.00 |
| | | Contributor address; City; Houston, TX 77055 | State; Zip Code | | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | _ | |
| | Attorney | | | Attorney | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Law Offices | of Javier Marcos & Associat | es, PC | Law Offices of Javier M | arc | os & Associates, PC |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|------------------|---|---|------------------------|--|-------------|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 45/79 Rpt: 49/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/26/2025 | 5 Full name of contributor Massa, Tamlyn6 Contributor address; City; | mlyn | | 7 | Amount of Contribution (\$) \$250.00 |
| | | Houston, TX 77042 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | LO Contributor's employer/law firm McCathern Law Firm 11 Law firm of contributor's sp | | | oous | se (if any) | |
| 12 | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | T | Amount of Contribution (\$) |
| | 06/30/2025 Mayer, Colleen Contributor address; City; State; Zip Code | | | | \$250.00 | |
| | Houston, TX 77027 | | | | | |
| | Contributor's Principal Occupation Contributor's Job Title | | | | | |
| | Lawyer | | | Lawyer | | |
| | Kirkland & E | employer/law firm | | Law firm of contributor's sp O'Brien Stogner | oous | se (IT any) |
| | | s a child, law firm of parent(s) (i | f any) | O Brieff Stogner | | |
| | | | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/25/2025 | McAdams, Annie Contributor address; City; | State; Zip Code | | | \$1,000.00 |
| | | Houston, TX 77092 | | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Attorney | | | Attorney | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| Annie McAdams PC | | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
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| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 46/79 Rpt: 50/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 1 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 05/28/2025 | 5 Full name of contributor McClelland, Shane | | | 7 / | Amount of Contribution (\$) \$1,000.00 |
| | | Katy, TX 77450 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney Attorney | | | | | |
| 10 | 0 Contributor's employer/law firmLaw Office of Shane McClelland, PLLC | | | oouse | e (if any) | |
| 12 | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 05/25/2025 McConn, Timothy Contributor address; City; State; Zip Code | | | | \$2,500.00 | |
| | | Houston, TX 77009 | | | | |
| | Contributor's Principal Occupation Contributor's Job Title | | | | | |
| | Lawyer | | | Lawyer | | |
| | Yetter Colen | employer/law firm | | Law firm of contributor's sp | oouse | e (if any) |
| _ | | s a child, law firm of parent(s) (i | f any) | | | |
| | ii contributor i | s a cilliu, iaw iiiiii oi pareiii(s) (i | i aliy) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 05/13/2025 | McFarland, John | _ | | | \$100.00 |
| | | Contributor address; City; Houston, TX 77030 | State; Zip Code | | · | |
| | Contributor's I | rincipal Occupation | | Contributor's Job Title | | |
| | Trial lawyer | | | Trial lawyer | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oouse | e (if any) |
| JM Lawyers | | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | • | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|---------------------------------|---|---|------------------------|------------------------------|-------------|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 47/79 Rpt: 51/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/25/2025 | 5 Full name of contributor McGregor, Nancy6 Contributor address; City; | ncy | | 7 | Amount of Contribution (\$) \$5,000.00 |
| | | Houston, TX 77019 | | _ | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| 40 | retired retired O Contributor's employer/law firm 11 Law firm of contributor's sp | | | | of the same | |
| 10 | retired | | | oous | se (II 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 (\$) |
| | 06/27/2025 McLeod, William Contributor address; City; State; Zip Code | | | | \$250.00 | |
| | Cambuilardanla | Houston, TX 77044 | | Contributor's Job Title | | |
| · · · | | Attorney | | | | |
| - | | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | | f William D McLeod | | | | · • |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Π | Amount of Contribution (\$) |
| | 06/04/2025 | McLeod, William Contributor address; City; | State; Zip Code | | | \$4,000.00 |
| | | Houston, TX 77044 | | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | - | |
| | Attorney | | | Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| Law Office of William D. McLeod | | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A | \(J)1 |
|----|--|---|------------------------|------------------------------|-------------|---|------------|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | ral pages Schedule A(J)1: h: 48/79 Rpt: 52/126 | |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 1 | er ID (Ethics Commission 081751 | n Filers) |
| 4 | Date 06/18/2025 | 5 Full name of contributor Mcclelland, Wanda6 Contributor address; City; | Vanda | | 7 An | ount of Contribution (\$) | \$200.00 |
| | | Houston, TX 77027 | | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | | |
| | Admin Admin | | | | | | |
| 10 | O Contributor's employer/law firm Wanda McClelland 11 Law firm of contributor's sp | | | oouse (i | any) | | |
| 12 | | s a child, law firm of parent(s) (i | f any) | <u>l</u> | | | |
| | | | | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | An | ount of Contribution (\$) | |
| | 06/04/2025 Medina, David M. Contributor address; City; State; Zip Code | | | | | \$100.00 | |
| | | Houston, TX 77030 | | | | | |
| | Contributor's Principal Occupation Contributor's Job Title | | | | | | |
| | Lawyer | | | Lawyer | | | |
| | | employer/law firm | | Law firm of contributor's sp | oouse (i | any) | |
| | Nelson Mulli | | f any) | | | | |
| | ii contributor i | s a child, law firm of parent(s) (i | i any) | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | l Am | ount of Contribution (\$) | |
| | 05/24/2025 | Melton, Brian | | | | | \$5,000.00 |
| | Contributor address; City; State; Zip Code Bellaire, TX 77401-5702 | | | | | | |
| | Contributor's I | I Principal Occupation | | Contributor's Job Title | <u> </u> | | |
| | Attorney | | | Attorney | | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oouse (i | any) | |
| | Susman Go | dfrey | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | | |
| | | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|--|--|------------------------|------------------------------|-------------|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 49/79 Rpt: 53/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/03/2025 | 5 Full name of contributor Merkley, David | | | 7 | Amount of Contribution (\$) \$5,000.00 |
| | | Houston, TX 77008 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Partner/Attorney Partner/Attorney | | | | | |
| 10 | 0 Contributor's employer/law firmSBSB-Eastham11 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 (\$) |
| | 06/04/2025 Minces, David Contributor address; City; State; Zip Code | | | | \$250.00 | |
| | Bellaire, TX 77401 Contributor's Principal Occupation Contributor's Job Title | | | <u> </u> | | |
| | Lawyer | тпора Оссираноп | | Lawyer | | |
| - | | employer/law firm | | Law firm of contributor's sp | oous | se (if anv) |
| | Minces Rank | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | |
| = | Date | Full name of contributor | out-of-state PAC (ID#: |) | Τ | Amount of Contribution (\$) |
| | 05/27/2025 | Mithoff, Richard | | | | \$1,000.00 |
| | | 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) (i | f any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
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| | The Instru | ction Guide explains ho | w to complete this t | form. | 1 | Total pages Schedule A(J)1: Sch: 50/79 Rpt: 54/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/20/2025 | _ ` | | 7 | Amount of Contribution (\$) \$5,000.00 | |
| | | Houston, TX 77027 | | | | |
| 8 | Contributor's F | Principal Occupation | | 9 Contributor's Job Title | | |
| 10 Contributor's employer/law firm 11 Law firm of contributor | | | 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#: |) | Т | Amount of Contribution (\$) |
| | 06/03/2025 Montazari, Soroush Contributor address; City; State; Zip Code | | | | \$1,000.00 | |
| | | Houston, TX 77007 | | T | | |
| Contributor's Principal Occupation Contributor's Job Tit | | | | | | |
| _ | Attorney | employer/law firm | | Attorney Law firm of contributor's sp | | on (if any) |
| | | atkins, Nichols, Agosto, Aziz | z & Stoaner | Law IIIII of Continutions Sp | Jou: | se (II arry) |
| | | s a child, law firm of parent(s) (i | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Τ | Amount of Contribution (\$) |
| | 05/21/2025 Montgomery, Joel Contributor address; City; State; Zip Code | | | \$500.00 | | |
| | | Houston, TX 77002 | | 1 | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| | Attorney Attorney Contributor's employer/law firm Law firm of contributor's si | | | | 2011 | on (if any) |
| | | Il Montgomery LLP | | Law firm of contributor's sp | Jou: | se (II arry) |
| | | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL C | CONTRIBUTIO | DNS | SCHEDULE A(J)1 |
|--|---|--|------------------------------|--|---|
| | The Instru | ction Guide explains how | to complete this f | orm. | 1 Total pages Schedule A(J)1: Sch: 51/79 Rpt: 55/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/03/2025 | | | 7 Amount of Contribution (\$) \$1,000.00 | |
| 8 | Contributor's F | Contributor's Principal Occupation 9 Contributor's Job Title | | | <u> </u> |
| | Attorney | | | | |
| 10 | O Contributor's employer/law firm AZA Law 11 Law firm of contributor's sp | | oouse (if any) | | |
| 12 | If contributor is | s a child, law firm of parent(s) (if a | nny) | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| | 06/04/2025 Morris, Bruce Contributor address; City; State; Zip Code Houston, TX 77024 | | | \$500.00 | |
| Contributor's Principal Occupation Contributor's Job Title | | | <u> </u> | | |
| | Lawyer | | | Lawyer | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oouse (if any) |
| | Kane Russe | Il Coleman Logan | | | |
| | If contributor is | s a child, law firm of parent(s) (if a | ny) | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| | 05/15/2025 Moye, Will Contributor address; City; State; Zip Code Houston, TX 77055 | | | \$1,000.00 | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | |
| | Attorney | | | Attorney | |
| Contributor's employer/law firm Law firm of contr | | | Law firm of contributor's sp | oouse (if any) | |
| Moye Law Firm Moye Law Fir | | | Moye Law Firm | | |
| | If contributor is | s a child, law firm of parent(s) (if a | ny) | | |
| | | | | | |

| | MONET | ARY POLITICAL CONTR | RIBUTIC | ONS | | SCHEDULE | A(J)1 |
|---------------------------------|---|--|-----------------|------------------------------|-----------------------------|---|------------|
| | The Instru | ction Guide explains how to comp | olete this f | orm. | ı | otal pages Schedule A(J)1 Sch: 52/79 Rpt: 56/126 | : |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | l | iler ID (Ethics Commissi 0081751 | on Filers) |
| 4 | Date 05/27/2025 | | | 7 A | amount of Contribution (\$) | \$100.00 | |
| 8 | Contributor's I | ributor's Principal Occupation 9 Contributor's Job Title | | | <u> </u> | | |
| | | onal injury lawyer Personal injury lawyer | | | | | |
| 10 | 0 Contributor's employer/law firm Craig Muessig Law 11 Law firm of contributor's spo | | ouse | (if any) | | | |
| 12 | | s a child, law firm of parent(s) (if any) | | <u> </u> | | | |
| | Date | Full name of contributor out-of-st | tate PAC (ID#:_ |) | Ι Δ | mount of Contribution (\$) | |
| | 06/02/2025 Mukerji, Shampa Contributor address; City; State; Zip Code Houston, TX 77006 | | | | incom of continuous (4) | \$250.00 | |
| | Contributor's Principal Occupation Contributor's Job Title | | | | | | |
| | Attorney | | | Attorney | | | |
| | | employer/law firm | | Law firm of contributor's sp | ouse | (if any) | |
| | Mukerji Law | | | Mukerji Law Firm | | (,) | |
| | | s a child, law firm of parent(s) (if any) | | | | | |
| | Date | Full name of contributor out-of-st | tate PAC (ID#:_ | | Α | mount of Contribution (\$) | |
| | 05/19/2025 | Muncsh, Hardt, Kopf & Harr PC Contributor address; City; State; Zip Cod Dallas, TX 75201 | de | | | | \$500.00 |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | <u>I</u> | | |
| Contributor's employer/law firm | | | | Law firm of contributor's sp | ouse | (if any) | |
| | If contributor is | s a child, law firm of parent(s) (if any) | | ı | | | |
| | | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
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| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 53/79 Rpt: 57/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/18/2025 | 5 Full name of contributor Nguyen, Mai Trang6 Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$1,000.00 |
| | | Houston, TX 77082 | | | | |
| 8 | Contributor's F | Principal Occupation | | 9 Contributor's Job Title | | |
| | Psychologist | İ | | Psychologist | | |
| 10 | 0 Contributor's employer/law firmNguyen & Associates Counseling Services | | | oous | se (if any) | |
| 12 | | s a child, law firm of parent(s) (i | | | | |
| | | , | ,, | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Т | Amount of Contribution (\$) |
| | 06/04/2025 Noe Wilson, Susan | | | | \$1,000.00 | |
| | Contributor address; City; State; Zip Code | | | | | |
| | | Houston, TX 77055 | | | | |
| Contributor's Principal Occupation Contributor's Job Title | | Contributor's Job Title | | | | |
| | Attorney | | | Attorney | | |
| | 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) (i | f any) | 1 | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: | | Т | Amount of Contribution (\$) |
| | 05/28/2025 | Nolen, Rand | U out-of-state PAC (ID#. |) | | \$100.00 |
| | 03/20/2023 | Contributor address; City; | Stata: 7in Codo | | | Ψ100.00 |
| | | | State, Zip Code | | | |
| | | Houston, TX 77019 | | | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| Fleming, Nolen & Jez, LLP | | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | fany) | | | |
| \vdash | | | | | | |
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| | MONET | ARY POLITICAL | CONTRIBUTIO | ONS | | SCHEDULE A(J)1 |
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| | The Instru | ction Guide explains ho | w to complete this f | orm. | 1 | Total pages Schedule A(J)1: Sch: 54/79 Rpt: 58/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/24/2025 | | Norton Rose Fulbright US LLP Texas Committee 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) \$1,000.00 |
| | | Houston, TX 77010 | | | | |
| 8 | Contributor's F | Principal Occupation | ipal Occupation 9 Contributor's Job Title | | | |
| 10 | 10 Contributor's employer/law firm | | | 11 Law firm of contributor's sp | oous | se (if any) |
| 12 | 2 If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Т | Amount of Contribution (\$) |
| | O6/04/2025 Olson & Olson LLP Contributor address; City; State; Zip Code | | | | \$250.00 | |
| | | Houston, TX 77019 | | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | | |
| | Contributor's 6 | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | <u> </u> | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 05/19/2025 | Ormiston, James Contributor address; City; | State; Zip Code | | | \$500.00 |
| | | Houston, TX 77056 | | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | • | |
| | Lawyer | | | Lawyer | | |
| | Contributor's employer/law firm Law firm of contributor's s | | | Law firm of contributor's sp | oous | se (if any) |
| | Gray Reed | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
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| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 55/79 Rpt: 59/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 05/22/2025 | 5 Full name of contributor Park, Seth | | | 7 | Amount of Contribution (\$) \$500.00 |
| | | Friendswood, TX 77546 | | | | |
| 8 | Contributor's I | Principal Occupation | | 9 Contributor's Job Title | | |
| | attorney attorney | | | | | |
| 10 | | employer/law firm m of Alton C. Todd | | 11 Law firm of contributor's sp | oous | e (if any) |
| 12 | | s a child, law firm of parent(s) (if | · any) | | | |
| 12 | in continuator is | s a cilliu, law litti oi paretii(s) (ii | any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/05/2025 Parthasarathi, Rashmi Contributor address; City; State; Zip Code | | | | \$150.00 | |
| | | Houston, TX 77040 | | | | |
| | Contributor's Principal Occupation Contributor's Job Title | | | Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | The Kishine | sky Law Firm PLLC | | | | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| H | Date | Full name of contributor | out-of-state PAC (ID#: |) | Τ | Amount of Contribution (\$) |
| | 06/26/2025 | Pastorini, Winifred | | | | \$200.00 |
| | Contributor address; City; State; Zip Code | | | | | |
| | | Houston, TX 77098 | | | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| | Attorney | | | Attorney | | Cf and |
| | The Pastorir | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | | s a child, law firm of parent(s) (if | any) | <u> </u> | | |
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| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | SCHEDULE A(J)1 |
|--|---------------------------|------------------------------------|------------------------|-------------------------------------|---|
| | The Instru | ction Guide explains ho | ow to complete this | form. | 1 Total pages Schedule A(J)1: Sch: 56/79 Rpt: 60/126 |
| 2 | FILER NAME | | | | 3 Filer ID (Ethics Commission Filers) |
| | Miller, Beau | A. (The Honorable) | | | 00081751 |
| 4 | Date | 5 Full name of contributor | out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| | 06/04/2025 | Patrick M Flynn PLC | | | \$1,000.00 |
| | | 6 Contributor address; City; | State; Zip Code | | |
| L | Contributorlo | Houston, TX 77008 | | Contributorio lob Titlo | |
| 8 | Contributors | Principal Occupation | | 9 Contributor's Job Title | |
| 10 Contributor's employer/law firm 11 | | | | 11 Law firm of contributor's s | pouse (if any) |
| 12 | If contributor i | s a child, law firm of parent(s) (| if any) | | |
| H | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 06/03/2025 | Pearce, Andrew | | | \$500.00 |
| Contributor address; City; State; Zip Code | | | State; Zip Code | | ··· |
| | | | | | |
| | | Houston, TX 77098 | | T - " | |
| | Contributor's Shareholder | Principal Occupation | | Contributor's Job Title Shareholder | |
| | | | | | nouse (if any) |
| | BoyarMiller | employer/law firm | | Law firm of contributor's s | pouse (ii ariy) |
| _ | | s a child, law firm of parent(s) (| if any) | | |
| | ii contributor i | o a cima, iaw iiiii oi parcin(o) (| ii airy) | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 05/29/2025 | Perry, Brent | | | \$500.00 |
| | | Contributor address; City; | State; Zip Code | | |
| | | | | | |
| | | Houston, TX 77010 | | | |
| | Contributor's | Principal Occupation | | Contributor's Job Title | 1 |
| | Attorney | | | Attorney | |
| | Contributor's | employer/law firm | | Law firm of contributor's s | pouse (if any) |
| | Burford Perr | y LLP | | | |
| | If contributor i | s a child, law firm of parent(s) (| if any) | | |
| | | | | | |
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| | MONET | ARY POLITICAL | CONTRIBUTIO | ONS | | SCHEDULE A(J)1 | |
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| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 57/79 Rpt: 61/126 | |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 1 | Filer ID (Ethics Commission Filers) 00081751 | |
| 4 | Date 06/20/2025 | Full name of contributor Piekalkiewicz, Andrew Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$2,500.00 | |
| | | Houston, TX 77041 | | | | | |
| 8 | Contributor's I Lawyer | Principal Occupation | | Contributor's Job Title Lawyer | | | |
| 10 | | employer/law firm | | 11 Law firm of contributor's sp | าดบรค | e (if any) | |
| | | f Andrew Piekalkiewicz | | , | | (,) | |
| 12 | ! If contributor is | s a child, law firm of parent(s) (if | any) | 1 | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | O6/09/2025 Poelker, Kyle Contributor address; City; State; Zip Code | | | | \$250.00 | | |
| | | Houston, TX 77030 | | | | | |
| | | Principal Occupation | | Contributor's Job Title | | | |
| _ | Attorney | employer/law firm | | Attorney Law firm of contributor's sp | 201100 | (if any) | |
| | AZA | етіріоуетлам інті | | 1st Court of Appeals of | | | |
| | | s a child, law firm of parent(s) (if | any) | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | , | Amount of Contribution (\$) | |
| | 05/29/2025 | Porter Hedges LLP Contributor address; City; | State; Zip Code | | | \$500.00 | |
| | Contributorio | Houston, TX 77002 | | Contributorio Joh Titlo | | | |
| | Contributors | Principal Occupation | | Contributor's Job Title | | | |
| | Contributor's 6 | employer/law firm | | Law firm of contributor's sp | oouse | e (if any) | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | | |
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| | MONET | ARY POLITICAL | ONS | | SCHEDULE A(J)1 | |
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| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 58/79 Rpt: 62/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/09/2025 | Full name of contributor Porter, Christopher Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$250.00 |
| | | Houston, TX 77098 | | | | |
| 8 | Contributor's F | Principal Occupation | | 9 Contributor's Job Title | | |
| | | artner, Houston | | Managing Partner, Hou | sto | n |
| 10 | | employer/law firm | | 11 Law firm of contributor's sp | oous | se (if any) |
| _ | | uel Urquhart & Sullivan, LLF | | | | |
| 12 | If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/04/2025 Powells, Willie Contributor address; City; State; Zip Code | | | | \$5,000.00 | |
| | | Houston, TX 77074 | | | | |
| | Contributor's Principal Occupation Contributor's Job Title | | | | | |
| | Attorney | | | Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Self employe | | | | | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | T | Amount of Contribution (\$) |
| | 06/04/2025 | Prichett, Jesse | _ | | | \$5,000.00 |
| | Contributor address; City; State; Zip Code Sugar Land, TX 77479 | | | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Attorney | inisipai o coupation | | Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Self employe | | | | | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHED | ULE A | A(J)1 |
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| | The Instru | ction Guide explains ho | ow to complete this f | form. | 1 | Total pages Schedu Sch: 59/79 Rpt: 6 | | : |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Co | ommissi | on Filers) |
| | Miller, Beau | A. (The Honorable) | | | | 00081751 | | |
| 4 | Date 06/25/2025 | Full name of contributorPusch & NguyenContributor address; City; | out-of-state PAC (ID#:_ | | 7 | Amount of Contribu | tion (\$) | \$5,000.00 |
| | | Houston, TX 77023 | | | | | | |
| 8 | Contributor's I | Principal Occupation | | 9 Contributor's Job Title | | | | |
| 10 | Contributor's | employer/law firm | | 11 Law firm of contributor's s | pous | se (if any) | | |
| 12 | ! If contributor i | s a child, law firm of parent(s) (| if any) | | | | | |
| H | Date | Full name of contributor | out-of-state PAC (ID#: | | T | Amount of Contribu | tion (\$) | |
| | 05/12/2025 | Pusch, Anthony | | | | | (,) | \$5,000.00 |
| | | Contributor address; City; | State: Zip Code | | | | | • |
| | | Houston, TX 77023 | | | | | | |
| Contributor's Principal Occupation | | | Contributor's Job Title | | | | | |
| | Lawyer | | | Lawyer | | | | |
| | | employer/law firm | | Law firm of contributor's s | pous | se (if any) | | |
| | Pusch & Ngi | uyen Injury Lawyers | | | | | | |
| | If contributor i | s a child, law firm of parent(s) (| if any) | | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribu | tion (\$) | |
| | 06/09/2025 | R. James Amaro PC | | | | | | \$5,000.00 |
| | | Contributor address; City; | State; Zip Code | | | | | |
| | 0 | Houston, TX 77008 | | I 0 17 1 1 1 77 | | | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | | | | |
| | Contributor's | employer/law firm | | Law firm of contributor's s | pous | se (if any) | | |
| | If contributor i | s a child, law firm of parent(s) (| if any) | | | | | |
| | | | | | | | | |
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| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE | A(J)1 |
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| | The Instru | ction Guide explains ho | w to complete this | form. | | pages Schedule A(J)1 60/79 Rpt: 64/126 | l: |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | | ID (Ethics Commissi 31751 | on Filers) |
| 4 | Date 06/02/2025 | 5 Full name of contributor Raizner, Jeff6 Contributor address; City; | out-of-state PAC (ID#: | | 7 Amol | unt of Contribution (\$) | \$500.00 |
| | | Houston, TX 77005 | | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | | |
| | Attorney | | | Attorney | | | |
| 10 | Contributor's e Raizner Slar | employer/law firm nia LLP | | 11 Law firm of contributor's sp | oouse (if a | iny) | |
| 12 | ! If contributor is | s a child, law firm of parent(s) (i | f any) | | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amo | unt of Contribution (\$) | |
| | 06/03/2025 Ramsey, Michael Contributor address; City; State; Zip Code | | | | | \$1,000.00 | |
| | Beaumont, TX 77706 | | | | | | |
| | Contributor's Principal Occupation Contributor's Job Title | | | | | | |
| | Owner | | | Owner | | | |
| | Ramsey Lav | employer/law firm | | Law firm of contributor's sp | oouse (if a | iny) | |
| | | s a child, law firm of parent(s) (i | f any) | | | | |
| | ii continuator i | s a crilid, law littii or pareril(s) (i | any) | | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amo | unt of Contribution (\$) | |
| | 06/26/2025 | Raymond, Shawn | | | | | \$500.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77024-7122 | | | | | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | <u> </u> | | |
| | Attorney | | | Attorney | | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oouse (if a | ıny) | |
| | Susman Go | dfrey LLP | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | fany) | | | | |
| | | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE | A(J)1 |
|----|---|---|------------------------|--|----------------|---|------------|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | pages Schedule A(J)1 61/79 Rpt: 65/126 | i: |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 Filer I 0008 | D (Ethics Commissi 1751 | on Filers) |
| 4 | Date 06/24/2025 | 5 Full name of contributor Reade, Cinthya Pena6 Contributor address; City; | out-of-state PAC (ID#: | | 7 Amou | unt of Contribution (\$) | \$1,000.00 |
| | | Houston, TX 77055 | | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | | |
| | Attorney | | | Attorney | | | |
| 10 | | employer/law firm | | 11 Law firm of contributor's sp JKZ & Associates Law | • | ny) | |
| L | Linebarger JKZ & Associates La 2 If contributor is a child, law firm of parent(s) (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#: |) | Amou | ınt of Contribution (\$) | |
| | 06/04/2025 Recht, Steven Contributor address; City; State; Zip Code | | | | | \$1,000.00 | |
| | Houston, TX 77019 | | | | | | |
| | Contributor's Principal Occupation Contributor's Job Title | | | | | | |
| | Attorney | | | Attorney | | | |
| | | employer/law firm | | Law firm of contributor's sp | oouse (if a | ny) | |
| | Recht Law C | | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | any) | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amou | int of Contribution (\$) | |
| | 06/03/2025 | Reyna, Sharon | _ | | | | \$500.00 |
| | | Contributor address; City; Houston, TX 77002 | State; Zip Code | | | | |
| | Contributor's I | I Principal Occupation | | Contributor's Job Title | <u> </u> | | |
| | Business De | velopment Specialist | | Business Development | Specialis | st | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oouse (if a | ny) | |
| | SBSB Easth | am | | | | | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | | |
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| | MONET | ARY POLITICAL | SCHEDULE A(J)1 | | |
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| | The Instru | ction Guide explains ho | w to complete this f | form. | 1 Total pages Schedule A(J)1: Sch: 62/79 Rpt: 66/126 |
| 2 | FILER NAME | | | | 3 Filer ID (Ethics Commission Filers) |
| | Miller, Beau | A. (The Honorable) | | | 00081751 |
| 4 | Date 06/02/2025 | Full name of contributor Reynolds Frizzell LLPContributor address; City; | out-of-state PAC (ID#: | | 7 Amount of Contribution (\$) \$1,000.00 |
| | | Houston, TX 77002 | | | |
| 8 | Contributor's | I Principal Occupation | | 9 Contributor's Job Title | |
| 10 | O Contributor's employer/law firm 11 Law firm of contributor's sp | | | pouse (if any) | |
| 12 | If contributor i | s a child, law firm of parent(s) (if | any) | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/26/2025 Ricardo L. Ramos PLLC | | | \$1,000.00 | | |
| Contributor address; City; State; Zip Code | | | State; Zip Code | | |
| | - | Houston, TX 77019 | | T | |
| | Contributor's | Principal Occupation | | Contributor's Job Title | |
| | Contributor's | employer/law firm | | Law firm of contributor's s | pouse (if any) |
| | If contributor i | s a child, law firm of parent(s) (if | any) | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 06/04/2025 | Riley Law Firm | | | \$250.00 |
| Contributor address; City; State; Zip Code | | | | | |
| | | Houston, TX 77007 | | 1 | |
| | Contributor's | Principal Occupation | | Contributor's Job Title | |
| Contributor's employer/law firm | | | | Law firm of contributor's s | pouse (if any) |
| | If contributor i | s a child, law firm of parent(s) (if | any) | <u> </u> | |
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| | MONET | ARY POLITICAL | | SCHEDULE A(J)1 | | |
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| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 63/79 Rpt: 67/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 1 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/04/2025 | 5 Full name of contributor Roberts, Benjamin6 Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$2,500.00 |
| | | Houston, TX 77005 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | Contributor's 6 Benjamin Ro | employer/law firm oberts Law | | 11 Law firm of contributor's sp | oous | e (if any) |
| 12 | | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 05/29/2025 Scott, Sydney Contributor address; City; State; Zip Code | | | | \$1,000.00 | |
| | | HOUSTON, TX 77006 | | | | |
| | Contributor's Principal Occupation Contributor's Job Title | | | | | |
| | Lawyer | | | Lawyer | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | | n & Crutcher, LLP | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | rany) | | | |
| = | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/02/2025 | Sears, Ross | _ | | | \$500.00 |
| Contributor address; City; State; Zip Code Houston, TX 77002 | | | | | | |
| | Contributor's F | I Principal Occupation | | Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | Ross A. Sea | rs II, PC | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | | SCHEDULE A(J)1 | | | |
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| | The Instru | ction Guide explains ho | ow to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 64/79 Rpt: 68/126 | |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 1 | Filer ID (Ethics Commission Filers) 00081751 | |
| 4 | Date 06/04/2025 | 5 Full name of contributor Sheppard, Daniel6 Contributor address; City; | out-of-state PAC (ID#: | | _ | Amount of Contribution (\$) \$1,000.00 | |
| | | Houston, TX 77056 | | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | | |
| 10 | Lawyer | employer/law firm | | Lawyer | 20110 | o (if any) | |
| 10 | Morrow & Sh | | | 11 Law firm of contributor's sp | Jous | e (II dily) | |
| 12 | | s a child, law firm of parent(s) (i | f any) | <u> </u> | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | O6/24/2025 Shields, Robert Contributor address; City; State; Zip Code | | | | \$5,000.00 | | |
| | Heath, TX 75032 Contributor's Principal Occupation Contributor's Job Title | | | | | | |
| | Contributor's Principal Occupation Contributor's Job Title Owner Owner | | | | | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | e (if anv) | |
| | MRI Centers | | | | | · // | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/27/2025 | Silver, Kathy Contributor address; City; | State; Zip Code | | | \$200.00 | |
| | | Houston, TX 77018 | | _ | | | |
| | | Principal Occupation | | Contributor's Job Title | | | |
| | Attorney Contributor's | employer/law firm | | Attorney Law firm of contributor's sp | 20110 | o (if any) | |
| | Jackson Wa | | | Law littl of contributors sp | Jous | e (II any) | |
| | | s a child, law firm of parent(s) (i | f any) | | | | |
| | | | | | | | |

| | MONET | ARY POLITICAL | ONS | | SCHEDULE A(J)1 | |
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| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 65/79 Rpt: 69/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 05/12/2025 | 5 Full name of contributor Sneed, Jonathan6 Contributor address; City; | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) \$500.00 |
| | | Houston, TX 77414 | | | | |
| 8 | Contributor's F | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | | employer/law firm | | 11 Law firm of contributor's sp | oous | se (if any) |
| _ | Abraham Wa | | | Arthur J. Gallagher | | |
| 12 | l if contributor is | s a child, law firm of parent(s) (i | tany) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/05/2025 Sorrels, Randall Contributor address; City; State; Zip Code | | | | \$2,500.00 | |
| | | Houston, TX 77007 | | | | |
| | Contributor's Principal Occupation Contributor's Job Title | | | • | | |
| | Lawyer | | | Lawyer | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oou | se (if any) |
| | Sorrels Law | | | Sorrels Law | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | Τ | Amount of Contribution (\$) |
| | 06/02/2025 | Soussan, Susan | — | | | \$100.00 |
| | | Contributor address; City; Houston, TX 77056 | State; Zip Code | | | |
| | Contributor's I | rincipal Occupation | | Contributor's Job Title | <u> </u> | |
| | Mediator/Ark | · | | Mediator/Arbitrator | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Susan S. So | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
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| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 66/79 Rpt: 70/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/02/2025 | 5 Full name of contributor Sovany, Herrick6 Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$1,000.00 |
| | | Houston, TX 77098 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | Contributor's 6 Sovany Law | employer/law firm Firm | | 11 Law firm of contributor's sp | oous | se (if any) |
| 12 | | s a child, law firm of parent(s) (if | anv) | | | |
| | - ii dontingator ii | o a orma, raw mm or parom(o) (n | y) | | | |
| H | Date | Full name of contributor | out-of-state PAC (ID#: |) | Τ | Amount of Contribution (\$) |
| | 06/24/2025 | Spagnoletti Law Firm Contributor address; City; | <u> </u> | | | \$5,000.00 |
| | | Houston, TX 77002 | . , | | | |
| | Contributor's 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 | any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/04/2025 | Spagnoletti, Marcus | | | | \$5,000.00 |
| | | Contributor address; City; Houston, TX 77002-162 | | | | |
| H | Contributor's F | Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Attorney | | | Attorney | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Spagnoletti I | _aw Firm | | | | |
| | If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE | A(J)1 |
|--|---|---|------------------------------|---------------------------------|------------------|---|------------|
| | The Instru | ction Guide explains ho | w to complete this t | form. | 1 | ages Schedule A(J)1 7/79 Rpt: 71/126 | L: |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 Filer ID 00081 | (Ethics Commissi | on Filers) |
| 4 | Date 05/28/2025 | 5 Full name of contributorStephens Law Firm PLL6 Contributor address; City; | | | | t of Contribution (\$) | \$5,000.00 |
| | | Fort Worth, TX 76107 | | | | | |
| 8 | Contributor's F | Principal Occupation | | 9 Contributor's Job Title | | | |
| 10 | Contributor's | employer/law firm | | 11 Law firm of contributor's sp | oouse (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#:) 05/23/2025 Stephens, Jason Contributor address; City; State; Zip Code | | Amoun | t of Contribution (\$) | \$5,000.00 | | |
| | | Fort Worth, TX 76107 | | | | | |
| | Contributor's Principal Occupation Contributor's Job Title | | | | | | |
| | Attorney | | | Attorney | | | |
| | | employer/law firm w Firm, PLLC | | Law firm of contributor's sp | oouse (if any | /) | |
| _ | | s a child, law firm of parent(s) (i | Family | | | | |
| | ii continuator i | s a cilliu, iaw iiiiii oi pareiii(s) (i | any) | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Amoun | t of Contribution (\$) | |
| | 05/12/2025 | Steptoe LLP | | | | | \$500.00 |
| Contributor address; City; State; Zip Code | | | | | | | |
| | O a materilla cota anta d | Washington, DC 20036 | | Occasilente de Joh Tide | | | |
| | Contributors | 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) (i | f any) | <u> </u> | | | |
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| | MONET | ARY POLITICAL | | SCHEDULE A(J)1 | | |
|---|---|---|------------------------|---------------------------------|----------|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 68/79 Rpt: 72/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 1 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 05/27/2025 | 5 Full name of contributor Stevenson & Murray LL 6 Contributor address; City; | | | 7 | Amount of Contribution (\$) \$1,000.00 |
| | | Houston, TX 77046 | | | | |
| 8 | Contributor's F | Principal Occupation | | 9 Contributor's Job Title | | |
| 10 | Contributor's 6 | employer/law firm | | 11 Law firm of contributor's sp | 00US | e (if any) |
| 12 | 2 If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | Ι | Amount of Contribution (\$) |
| | 06/03/2025 Stewart J. Guss & Associates Contributor address; City; State; Zip Code | | | | \$500.00 | |
| | Houston, TX 77070 | | | | | |
| | Contributor's Principal Occupation Contributor's Job Title | | | | | |
| | Contributor's 6 | employer/law firm | | Law firm of contributor's sp | oous | e (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 (\$) |
| 05/29/2025 Stogner, Brant Contributor address; City; State; Zip Code | | | | \$2,000.00 | | |
| | | Houston, TX 77042 | | | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| | Trial Lawyer | | | Trial Lawyer | | - (:t) |
| | | employer/law firm Partners at Abraham Watki | ns | Law firm of contributor's sp | oouse | e (II any) |
| | | s a child, law firm of parent(s) (i | | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|--|--|------------------------|------------------------------|----------|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 69/79 Rpt: 73/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/30/2025 | 5 Full name of contributor Stogner, Brant6 Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$2,500.00 |
| | | Houston, TX 77042 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Trial Lawyer | | | Trial Lawyer | | |
| 10 | 10 Contributor's employer/law firmSelf - Equity Partners at Abraham Watkins | | | | 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 (\$) |
| | 06/18/2025 | Streich, Michael Contributor address; City; | State; Zip Code | | | \$1,000.00 |
| | | Crosby, TX 77532 | | | | |
| | | Principal Occupation | | Contributor's Job Title | | |
| | Lawyer | | | Lawyer | | |
| | Zehl & Asso | employer/law firm | | Law firm of contributor's sp | Jous | se (II any) |
| _ | | s a child, law firm of parent(s) (i | f any) | | | |
| | ii continuator i | o a orma, law mm or paremiles (| , any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/04/2025 | Sturm, Charles | _ | | | \$1,000.00 |
| | | Contributor address; City; houston, TX 77002 | State; Zip Code | | | |
| | Contributor's I | I Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | attorney | | | attorney | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | Sturm Law F | PLLC | | | | |
| | 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 | ow to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 70/79 Rpt: 74/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 05/28/2025 | 5 Full name of contributor Sullivan, Roger6 Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$500.00 |
| | | Houston, TX 77007 | | _ | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| 10 | Lawyer | employer/law firm | | Lawyer 11 Law firm of contributor's sp | 20116 | co (if any) |
| 10 | | an Trial Lawyers, PLLC | | 11 Law IIIII of Contributor 5 Sp | Jous | se (ii ariy) |
| 12 | If contributor is | s a child, law firm of parent(s) (i | f any) | L | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 05/15/2025 | Susman Godfrey LLP Contributor address; City; | State; Zip Code | | | \$2,500.00 |
| | | Houston, TX 77002 | | T | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/04/2025 Terry, Marilyn Contributor address; City; State; Zip Code | | | | \$25.00 | |
| | Contributor's F | Spring, TX 77379 Principal Occupation | | Contributor's Job Title | | |
| | self | molpai Geografion | | self | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | self | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
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| | MONET | ARY POLITICAL CONTRIE | BUTIC | ONS | | SCHEDULE A(J)1 |
|----|---|---|------------|--------------------------------------|--------------------------------------|---|
| | The Instru | ction Guide explains how to comple | te this f | orm. | 1 | Total pages Schedule A(J)1: Sch: 71/79 Rpt: 75/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | ı | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/05/2025 | | | 7 | Amount of Contribution (\$) \$250.00 | |
| 8 | Contributor's I | Principal Occupation | | 9 Contributor's Job Title | <u> </u> | |
| 10 | Contributor's | employer/law firm | | 11 Law firm of contributor's sp | ous | e (if any) |
| 12 | ! If contributor is | s a child, law firm of parent(s) (if any) | | <u> </u> | | |
| | Date O6/04/2025 Full name of contributor out-of-state PAC (ID#:) The Poerschke Law Firm PC Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) \$700.00 | | |
| | Contributor's I | Houston, TX 77079 Principal Occupation | | Contributor's Job Title | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | ous | e (if any) |
| | If contributor is | s a child, law firm of parent(s) (if any) | | | | |
| | Date 06/04/2025 | Full name of contributor out-of-state The West Law Firm Contributor address; City; State; Zip Code Sugar Land, TX 77479 | PAC (ID#:_ |) | | Amount of Contribution (\$) \$5,000.00 |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Contributor's e | employer/law firm | | Law firm of contributor's sp | ous | e (if any) |
| | If contributor is | s a child, law firm of parent(s) (if any) | | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|--|--|------------------------|------------------------------|----------|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 72/79 Rpt: 76/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 05/17/2025 | 5 Full name of contributor Thweatt, Lee6 Contributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$1,000.00 |
| | | Houston, TX 77009 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | attorney | | | attorney | | |
| 10 | LO Contributor's employer/law firm Terry & Thweatt, PC 11 Law firm of contributor's sp | | | | oous | e (if any) |
| 12 | If contributor is | s a child, law firm of parent(s) (i | f any) | l | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | T | Amount of Contribution (\$) |
| | 06/03/2025 | Toy, David Contributor address; City; | <u> </u> | | | \$250.00 |
| | | Houston, TX 77006 | | | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | David Toy La | aw Firm | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Ī | Amount of Contribution (\$) |
| | 06/25/2025 | Tran, Hai | _ | | | \$1,000.00 |
| | | Contributor address; City; Houston, TX 77014 | State; Zip Code | | | |
| | Contributor's I | I Principal Occupation | | Contributor's Job Title | <u> </u> | |
| | Chiropractor | | | Chiropractor | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | Self | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | |
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| | MONET | ARY POLITICAL (| CONTRIBUTIO | ONS | | SCHEDULE A(J)1 |
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| | The Instru | ction Guide explains how | v to complete this f | orm. | 1 | Total pages Schedule A(J)1: Sch: 73/79 Rpt: 77/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/24/2025 | 5 Full name of contributorTran, Kim6 Contributor address; City; S | out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) \$2,500.00 |
| | | Houston, TX 77055 | | | | |
| 8 | Contributor's F | Principal Occupation | | 9 Contributor's Job Title CEO | | |
| 10 | 10 Contributor's employer/law firm Texas Regional Physicians 11 Law firm of contributor's sp | | | | oous | se (if any) |
| 12 | | s a child, law firm of parent(s) (if | any) | <u>I</u> | | |
| | Date 06/02/2025 | Full name of contributor VSS & P FED PAC Contributor address; City; S | x out-of-state PAC (ID#:_ | C00220764) | | Amount of Contribution (\$) \$1,000.00 |
| | | Columbus, OH 43215 | | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | | |
| | Contributor's 6 | employer/law firm | | Law firm of contributor's sp | oous | se (if any) |
| | If contributor is | s a child, law firm of parent(s) (if | any) | <u> </u> | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | Π | Amount of Contribution (\$) |
| | 06/04/2025 | Vinson & Elkins Texas Pa Contributor address; City; S Houston, TX 77002 | | | | \$2,500.00 |
| | Contributor's F | 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) | l | | |
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| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
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| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 74/79 Rpt: 78/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/02/2025 | Full name of contributorVolberding, JamesContributor address; City; | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) \$250.00 |
| | | Tyler, TX 75703 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| _ | Attorney | | | Attorney | | |
| 10 | | employer/law firm .egal Group PLLC | | 11 Law firm of contributor's sp | oous | e (if any) |
| 12 | | s a child, law firm of parent(s) (i | f any) | <u> </u> | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/30/2025 | Voltchek, Katherine Contributor address; City; | | | | \$25.00 |
| L | Contributorio | Highland Park, IL 60035 |) | Contributor's Job Title | | |
| | NA | Principal Occupation | | NA | | |
| | | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/04/2025 Wadler Law Contributor address; City; State; Zip Code | | | | \$250.00 | |
| | | Houston, TX 77027 | | | | |
| | Contributor's F | Principal Occupation | | Contributor's Job Title | | |
| | Contributor's 6 | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL | CONTRIBUTIO | ONS | | SCHEDULE A(J)1 |
|----|--|--|-------------------------|---------------------------------|-------------|---|
| | The Instru | ction Guide explains ho | w to complete this f | orm. | 1 | Total pages Schedule A(J)1: Sch: 75/79 Rpt: 79/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 05/13/2025 | 5 Full name of contributor Ware Jackson6 Contributor address; City; S | out-of-state PAC (ID#:_ | | 7 | Amount of Contribution (\$) \$1,000.00 |
| | | Houston, TX 77019 | | | | |
| 8 | Contributor's F | Principal Occupation | | 9 Contributor's Job Title | | |
| 10 | 10 Contributor's employer/law firm 11 Law firm of contributor's sp | | | ous | se (if any) | |
| 12 | ! If contributor is | s a child, law firm of parent(s) (if | any) | | | |
| | Date 05/23/2025 | Full name of contributor Watt, Christopher Contributor address; City; \$ | out-of-state PAC (ID#:_ | | • | Amount of Contribution (\$) \$500.00 |
| | | Houston, TX 77010 | | | | |
| | Contributor's F Partner | Principal Occupation | | Contributor's Job Title Partner | | |
| | Contributor's e | employer/law firm LLP s a child, law firm of parent(s) (if | any) | Law firm of contributor's sp | oous | se (if any) |
| H | Date | Full name of contributor | out-of-state PAC (ID#: | | Г | Amount of Contribution (\$) |
| | 05/29/2025 | Weinberg & Weinberg LI Contributor address; City; S Houston, TX 77009 | _P | | • | \$500.00 |
| | Contributor's F | 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) | ı | | |
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| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|--|--|------------------------|------------------------------|------|---|
| | The Instru | ction Guide explains ho | w to complete this | form. | 1 | Total pages Schedule A(J)1: Sch: 76/79 Rpt: 80/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 3 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 06/04/2025 | 5 Full name of contributor West, Maddison6 Contributor address; City; | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) \$5,000.00 |
| | | Sugar Land, TX 77479 | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney | | | Attorney | | |
| 10 | LO Contributor's employer/law firm The West Law Firm 11 Law firm of contributor's sp | | | | oous | e (if any) |
| 12 | 2 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 (\$) |
| | 06/04/2025 | West, Scott Contributor address; City; Sugar Land, TX 77479 | State; Zip Code | | | \$5,000.00 |
| _ | Contributor's I | Principal Occupation | | Contributor's Job Title | | |
| | Attorney | incipal occupation | | Attorney | | |
| - | | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | The West La | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | 1 | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) |
| | 06/04/2025 | White, Kelsi | | | | \$100.00 |
| | | Contributor address; City; Houston, TX 77010 | | | | |
| | Contributor's F | rincipal Occupation | | Contributor's Job Title | | |
| | Lawyer | | | Lawyer | | |
| | Contributor's | employer/law firm | | Law firm of contributor's sp | oous | e (if any) |
| | AZA Law | | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | _ | |

| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE | A(J)1 | |
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| | The Instru | ction Guide explains ho | ow to complete this | form. | | pages Schedule A(J)1 77/79 Rpt: 81/126 | L: | |
| 2 | FILER NAME | | | | 3 Filer | ID (Ethics Commissi | on Filers) | |
| | Miller, Beau | A. (The Honorable) | | | 0008 | 31751 | | |
| 4 | Date 06/29/2025 | Full name of contributor Wright, TomContributor address; City; | out-of-state PAC (ID#: |) | 7 Amoi | unt of Contribution (\$) | \$2,500.00 | |
| | | Houston, TX 77056 | | | | | | |
| 8 | | Principal Occupation | | 9 Contributor's Job Title | | | | |
| | lawyer | | | lawyer | | | | |
| 10 | LO Contributor's employer/law firm | | | | pouse (if a | ny) | | |
| | Wright Close | | | | | | | |
| 12 | ! If contributor i | s a child, law firm of parent(s) (| if any) | | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: | | Amoi | unt of Contribution (\$) | | |
| | 06/26/2025 | Yarborough, Patrick | | | | | \$1,000.00 | |
| | | Contributor address; City; | State; Zip Code | | - | | | |
| | | Houston, TX 77002 | | | | | | |
| | | Principal Occupation | | Contributor's Job Title | | | | |
| | Lawyer | | | Lawyer | | | | |
| | | employer/law firm | | Law firm of contributor's s | | | | |
| | | orough PLLC | | Foster Yarborough PLI | _C | | | |
| | If contributor i | s a child, law firm of parent(s) (| if any) | | | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: | | Amoi | unt of Contribution (\$) | | |
| | 05/12/2025 | Yetter Coleman LLP | _ | | | | \$1,000.00 | |
| | | Contributor address; City; | State; Zip Code | | | | | |
| | | Houston, TX 77002 | | | | | | |
| | Contributor's I | Principal Occupation | | Contributor's Job Title | | | | |
| | Contributor's | employer/law firm | | Law firm of contributor's s | pouse (if a | ny) | | |
| | If contributor i | s a child, law firm of parent(s) (| if any) | I. | | | | |
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| | MONET | ARY POLITICAL | CONTRIBUTION | ONS | | SCHEDULE A(J)1 |
|----|--|--|------------------------|--------------------------------|----------|--|
| | The Instru | ction Guide explains ho | ow to complete this | form. | 1 | otal pages Schedule A(J)1: Sch: 78/79 Rpt: 82/126 |
| 2 | FILER NAME Miller, Beau | A. (The Honorable) | | | 1 | Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 05/23/2025 | 5 Full name of contributor Yetter, Paul6 Contributor address; City; | out-of-state PAC (ID#: | | 7 4 | Amount of Contribution (\$) \$1,000.00 |
| | | Spring, TX 77379 | | | | |
| 8 | Contributor's I | Principal Occupation | | 9 Contributor's Job Title | | |
| | Attorney Attorney | | | | | |
| 10 | LO Contributor's employer/law firm Yetter Coleman LLP | | | | oouse | (if any) |
| 12 | | s a child, law firm of parent(s) (i | f any) | | | |
| | | , | , | | | |
| F | Date | Full name of contributor | out-of-state PAC (ID#: |) | <i>P</i> | Amount of Contribution (\$) |
| | 06/25/2025 Zavitsanos, John | | | \$5,000.00 | | |
| | | Contributor address; City; | State; Zip Code | | | |
| | Cambuilaritarila | Houston, TX 77010 | | Contributorio Joh Title | | |
| | Lawyer | Principal Occupation | | Contributor's Job Title Lawyer | | |
| | | employer/law firm | | Law firm of contributor's sp | 201150 | (if any) |
| | AZA | simple yelliaw iiiiii | | Edw IIIII of Contributor 5 Sp | Jouse | (ii diry) |
| - | | s a child, law firm of parent(s) (i | f anv) | | | |
| | | | ,, | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | T A | Amount of Contribution (\$) |
| | 06/25/2025 | garner, Brett | – | , | | \$500.00 |
| | | Contributor address; City; | State; Zip Code | | | |
| | | Houston, TX 77003 | | | | |
| | Contributor's F | rincipal Occupation | | Contributor's Job Title | | |
| | healthcare p | rovider | | healthcare provider | | |
| | Contributor's employer/law firm Law firm of contributor's sp | | | oouse | (if any) | |
| | Allied Medic | al Centers | | | | |
| | If contributor is | s a child, law firm of parent(s) (i | f any) | | | |
| | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | DNS | | SCHEDULE A(J)1 |
|----|---|---|---------------------------------|--|-------------------------------|
| | The Instru | ction Guide explains how to complete this t | 1 | ges Schedule A(J)1: /79 Rpt: 83/126 | |
| 2 | FILER NAME | | | 1 | (Ethics Commission Filers) |
| _ | | A. (The Honorable) | | 000817 | |
| 4 | Date 5 Full name of contributor out-of-state PAC (ID#:) 06/25/2025 magni, rocco | | | 7 Amount | of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code | | | | \$300.00 |
| | | Contributor address, City, State, 2ip Code | | | |
| | | | | | |
| | | Houston, TX 77027 | | | |
| 8 | Contributor's F | I Principal Occupation | 9 Contributor's Job Title | <u> </u> | |
| | Lawyer | | Lawyer | | |
| 10 | Contributor's | employer/law firm | 11 Law firm of contributor's sp | oouse (if any) | |
| | Susman God | dfrey | | | |
| 12 | If contributor is | s a child, law firm of parent(s) (if any) | • | | |
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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| The Ins | struction Guide explains how to complete this f | orm. | 1 Total pages Sch Sch: 1/1 Rpt: | | | | |
|---|---|--|--|---|--|--|--|
| 2 FILER NA Miller, B | AME eau A. (The Honorable) | | 3 Filer ID (Ethic 00081751 | es Commission Filers) | | | |
| 4 TOTAL | OF UNITEMIZED IN-KIND POLITICAL CONTRIB | UTIONS | \$ | | | | |
| 5 Date 06/26/20 | 6 Full name of contributor out-of-state PAC (ID#:) Gomez, Michael 7 Contributor address; City; State; Zip Code Houston, TX 77027 | | | 9 In-kind contribution description I fundraising reception costs | | | |
| 10 Principal | occupation / Job title (FOR NON-JUDICIAL) (See instructions) | 11 Employer (FOR NON | | nstructions) | | | |
| Attorney 14 Contribut Jim Adle | or's employer/law firm (FOR JUDICIAL) er and Associates | 13 Contributor's job title Managing Attorney 15 Law firm of contributo | · · · · · · · · · · · · · · · · · · · | (See instructions) FOR JUDICIAL) | | | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | | | | | |
| Date 06/26/20 | Full name of contributor out-of-state PAC (ID#: D25 Lowenberg Law Firm Contributor address; City; State; Zip Code | | Amount of contribution (\$) \$2,500.00 | In-kind contribution description I fundraising reception costs | | | |
| | Houston, TX 77056 | | Check if travel of | | | | |
| Principal | occupation / Job title (FOR NON-JUDICIAL) (See instructions) | Employer (FOR NON | -JUDICIAL) (See ii | nstructions) | | | |
| Contribut | or's principal occupation (FOR JUDICIAL) | Contributor's job title (FOR JUDICIAL) (See instructions) | | | | | |
| Contribut | or's employer/law firm (FOR JUDICIAL) | Law firm of contributo | or's spouse (if any) (| FOR JUDICIAL) | | | |
| If contribu | utor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | | | | |
| Date 06/20/20 | Full name of contributor out-of-state PAC (ID#: Mireskandari, Amir Contributor address; City; State; Zip Code | | Amount of contribution (\$) \$500.00 | In-kind contribution description I fundraising reception costs | | | |
| Principal | Bellaire, TX 77401 occupation / Job title (FOR NON-JUDICIAL) (See instructions) | Employer (FOR NON | | outside of Texas. Complete Schedule T. | | | |
| 0 | and principal accounting (FOR AIRIOIAL) | Combiding stands (1.1. 1991) | (FOR HUDICIAL) | (Coo instructions) | | | |
| Ceo | or's principal occupation (FOR JUDICIAL) | Contributor's job title | (FOR JUDICIAL) | (See instructions) | | | |
| Contribut RMP Pa | or's employer/law firm (FOR JUDICIAL) urtners | Law firm of contributo | or's spouse (if any) (| FOR JUDICIAL) | | | |
| If contribu | utor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | | | | |
| | | | | | | | |

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | - | ials Expense Guide explains h | | ages | /Contract Labor | | Travel Out of Dis OTHER (enter a | strict category not listed a | bove) |
|---|--|----------|---------------------------------|----------------------------------|-------------|-------|--|--------|-------------------------------------|---------------------------------|--------------|
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | 13 | 3 F | iler ID | (Ethics Commis | sion Filers) |
| | Sch: 1/42 Rpt: 85/126 | | Miller, Beau A. (The Hon | orable) | | | | | 00081751 | , ::: - | , |
| 4 | Date | 5 | Payee name | | | | | | | | |
| | 06/01/2025 | | AABA of Houston | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee address; City; | State; | Zip Cod | de | | | | | |
| | \$30.00 | | 950 Echo Lane | | | | | | | | |
| | | | Ste 360 | | | | | | | | |
| | | | Houston, TX 77024 | | | | | | | | |
| 8 | PURPOSE | (a) | Category (See Categories listed | at the top of this sche | adula) | (b) | Description | | | | |
| | OF | | Contributions/Donations | | edule) | (- , | Check if travel ou | ıtside | e of Texas. Com | plete Schedule T. | |
| | EXPENDITURE | | Candidate/Officeholder/F | | ittee | | Check if Austin, T | ГХ, о | fficeholder living | j expense | |
| | | | | | | | membership di | ues | 6 | | |
| L | | | | | | | | | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OH | | andidate/Officeholder name | 0 | Office sou | ght | | | Office he | eld | |
| | expenditure to benefit C/Of | 1 | | | | | | | | | |
| | Date | | Payee name | | | | | | | | |
| | 06/05/2025 | | AB AV Rental | | | | | | | | |
| | Amount (\$) | | Payee address; City; | State; | Zip Co | de | | | | | |
| | \$190.05 | | 3219 Five Oaks Dr. | | | | | | | | |
| | | | | | | | | | | | |
| | | ├ | Missouri City, TX 77459 | | | | | | | | |
| | PURPOSE OF | | Category (See Categories listed | at the top of this sche | edule) | (b) | Description | : | t T O | ulata Cabadula T | |
| | EXPENDITURE | | Event Expense | | | | Check if travel ou Check if Austin, T | | | | |
| | | | | | | | av rental for fu | | | , . , | |
| | | | | | | | | | | | |
| | Complete ONLY if direct | | andidate/Officeholder name | 0 | Office soug | ght | | | Office he | eld | |
| | expenditure to benefit C/O | H | | | | | | | | | |
| | Date | | Payee name | | | | | | | | |
| L | 05/31/2025 | | AWA Houston | | | | | | | | |
| | Amount (\$) | | Payee address; City; | State; | Zip Cod | de | | | | | |
| | \$17.50 | | 2450 Louisiana St. | | | | | | | | |
| | | | Ste. 400-301 | | | | | | | | |
| | | | Houston, TX 77006 | | | | | | | | |
| | PURPOSE | (a) | Category (See Categories listed | at the top of this sche | edule) | (b) | Description | | | | |
| | OF EXPENDITURE | | Contributions/Donations | Made By | | | Check if travel ou | | | • | |
| | | | Candidate/Officeholder/F | Political Commi | ittee | | Check if Austin, T | | | j expense | |
| | | | | | | | membership di | ues | • | | |
| _ | Complete ONLY if direct | <u> </u> | andidate/Officeholder name | | Office soug | thr | | | Office he | -iu | |
| | expenditure to benefit C/O | | andidate/Officeriolider ridiffe | | vince and | giil | | | Onice ne | JIU. | |
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SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By Contributions/ Officials India Committee
Graduates/Officials India Committee

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 2/42 Rpt: 86/126 | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| | 03/14/2025 | Agnes Cafe |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$30.46 | 2132 Bissonnet |
| | | |
| | | Houston, TX 77005 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense campaign meeting |
| | | campaign meeting |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| ľ | expenditure to benefit C/O | |
| - | Date | Payee name |
| | 06/01/2025 | American Bar Association |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$245.00 | 1050 Connecticut Ave. N.W. |
| | Ψ243.00 | |
| | | Ste 400 |
| | | Washington, DC 20036 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | membership dues |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| | Date | Payee name |
| | 05/31/2025 | Area 5 Democrats |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$20.00 | P.O. Box 608 |
| | 420.00 | |
| | | Pearland, TX 77501 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Contributions/Donations Made By |
| | EXPENDITURE | Candidate/Officeholder/Political Committee |
| | | membership dues |
| | 0 1 0 0 0 0 0 0 | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| | 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: 3/42 Rpt: 87/126 | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| | 06/01/2025 | Asian American Democrats of Texas |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$20.00 | 7719 Ehrhardt Ln |
| | | |
| | | Sugar Land, TX 77479 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. |
| | | Candidate/Officeholder/Political Committee |
| | | monitorior padec |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| | Date | Payee name |
| | 01/02/2025 | B&B Butchers |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$2,317.46 | 1814 Washington Ave |
| | . ,- | |
| | | Houston, TX 77007 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense staff holiday dinner |
| | | Stan Honday annier |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| | Date | Payee name |
| | 06/09/2025 | Bailes Bates & Associates LLP |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$2,420.00 | 1650 Highway 6 |
| | | |
| | | Sugar Land, TX 77478 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Legal Services Check if travel outside of Texas. Complete Schedule T. |
| | EXI ENDITORE | Check if Austin, TX, officeholder living expense |
| | | pfs preperation services |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/Ol | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| l | 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: 4/42 Rpt: 88/126 | Miller, Beau A. (The Honorable) 00081751 | |
| 4 | Date | 5 Payee name | _ |
| l | 01/03/2025 | Barnaby's Cafe | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | - |
| l | \$25.84 | 801 Congress | |
| l | | | |
| l | | Houston, TX 77002 | |
| 8 | PURPOSE | | - |
| ľ | OF | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. | |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense | |
| | | lunch with staff | |
| | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held | |
| L | experialture to benefit C/OI | <u> </u> | |
| Г | Date | Payee name | |
| l | 02/12/2025 | Barnaby's Cafe | |
| Г | Amount (\$) | Payee address; City; State; Zip Code | |
| l | \$69.32 | 801 Congress | |
| l | | | |
| | | Houston, TX 77002 | |
| Г | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | _ |
| l | OF EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. | |
| l | | Check if Austin, TX, officeholder living expense | |
| | | judges lunch | |
| ⊢ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | _ |
| l | expenditure to benefit C/O | | |
| ⊨ | D-4- | | = |
| l | Date 03/13/2025 | Payee name | |
| | | Barnaby's Cafe | _ |
| l | Amount (\$) | Payee address; City; State; Zip Code | |
| l | \$114.85 | 801 Congress | |
| l | | | |
| | | Houston, TX 77002 | |
| l | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| l | EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | |
| l | | law clerk lunch | |
| | | | |
| \vdash | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | _ |
| | expenditure to benefit C/OI | | |
| \vdash | | | - |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 5/42 Rpt: 89/126 | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| | 02/27/2025 | Barnaby's Cafe |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$68.83 | 801 Congress |
| | | |
| | | Houston, TX 77002 |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | judges lunch |
| | | judgoo lahon |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| 9 | expenditure to benefit C/O | |
| \vdash | Dete | |
| | Date | Payee name |
| | 02/21/2025 | Barnaby's Cafe |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$25.00 | 801 Congress |
| | | |
| | | Houston, TX 77002 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Judges lunch |
| | | Judges lunch |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/O | v |
| _ | _ | |
| | Date | Payee name |
| | 04/10/2025 | Barnaby's Cafe |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$89.23 | 801 Congress |
| | | |
| | | Houston, TX 77002 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Food/Beverage Expense |
| | EXI ENDITORE | Check if Austin, TX, officeholder living expense |
| | | law clerk lunch |
| | Operation Of the Control of the Cont | Open distribute (Office health an arms) |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought Office held |
| | Oriana.o to borioni O/Oi | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Printing Expense Salaries/Wages/Contract Labor Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 6/42 Rpt: 90/126 Miller, Beau A. (The Honorable) 00081751 4 Date Payee name 03/19/2025 Barnaby's Cafe 6 Amount (\$) Payee address; City; State; Zip Code \$48.71 801 Congress Houston, TX 77002 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense law clerk lunch Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/01/2025 Bay Area Democratic Movement Amount (\$) Payee address; City; State; Zip Code \$25.00 PO Box 590383 Houston, TX 77259 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee membership dues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/01/2025 **Bayou Blue Democrats** Amount (\$) Payee address: City; State; Zip Code \$30.00 3051 Locke Ln. Houston, TX 77019 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee membership dues Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| | Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|---|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 7/42 Rpt: 91/126 | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| | 06/01/2025 | Bayou City Strategies |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$2,000.00 | PO Box 667204 |
| l | | |
| l | | Houston, TX 77267 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| l | OF EXPENDITURE | Consulting Expense Check if travel outside of Texas. Complete Schedule T. |
| l | | Check if Austin, TX, officeholder living expense fundraising and compliance services |
| | | fundraising and compliance services |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| ľ | expenditure to benefit C/OI | |
| ⊨ | Date | Payee name |
| l | 04/01/2025 | Bayou City Strategies |
| ┝ | Amount (\$) | Payee address; City; State; Zip Code |
| l | \$2,000.00 | PO Box 667204 |
| l | Ψ2,000.00 | 1 0 Box 001204 |
| | | Houston, TX 77267 |
| ┡ | PURPOSE | |
| l | OF | (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. |
| l | EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | | fundraising and compliance services |
| L | | |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| L | experience to benefit Gree | |
| l | Date | Payee name |
| | 06/01/2025 | Baytown Area Democrats |
| l | Amount (\$) | Payee address; City; State; Zip Code |
| | \$25.00 | PO Box 2158 |
| | | |
| L | | Houston, TX 77522 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| l | EXPENDITURE | Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| l | | membership dues |
| | | |
| H | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | | |
| | | |
| | | |

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

| | Credit Card Payment | The Instruction Guide explains how to con | - | te this form. |
|---|--|--|-------|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 8/42 Rpt: 92/126 | Miller, Beau A. (The Honorable) | | 00081751 |
| 4 | Date | 5 Payee name | | • |
| | 02/13/2025 | Block 142 | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Coo | de | |
| | \$20.00 | 710 Walker St. | | |
| | | | | |
| | | Houston, TX 77002 | | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) | Description |
| | OF EXPENDITURE | Event Expense | | Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITORE | | | Check if Austin, TX, officeholder living expense |
| | | | | parking for HBA event |
| _ | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office soug | jht | Office held |
| | | | | |
| | Date | Payee name | | |
| | 02/20/2025 | Block 142 | | |
| | Amount (\$) | Payee address; City; State; Zip Coo | de | |
| | \$25.00 | 710 Walker St. | | |
| | | | | |
| | | Houston, TX 77002 | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) | Description |
| | OF EXPENDITURE | Event Expense | | Check if travel outside of Texas. Complete Schedule T. |
| | EXI ENDITORE | | | Check if Austin, TX, officeholder living expense |
| | | | | HBA parking |
| | Complete ONLY if direct | Condidate/Officeholder name | ıb+ | Office hold |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office soug | JIIL | Office held |
| | | | | |
| | Date | Payee name | | |
| | 02/23/2025 | Block 142 | | |
| | Amount (\$) | Payee address; City; State; Zip Coo | de | |
| | \$8.00 | 710 Walker St. | | |
| | | | | |
| | | Houston, TX 77002 | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) | Description |
| | OF EXPENDITURE | Event Expense | | Check if travel outside of Texas. Complete Schedule T. |
| | | | | Check if Austin, TX, officeholder living expense |
| | | | | HBA parking |
| | Complete ONLY if direct | Candidate/Officeholder name Office soug | ıht | Office held |
| | Complete ONLY if direct expenditure to benefit C/OI | | ji IL | Office field |
| | | | | |
| | | | | |
| | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

| Accounting/Banking Consulting Expense Contributions/ Donations Made By - | | | F F (mittee L | Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Gui | Expense | Office Ove Polling Exp Printing Ex Salaries/W | rhead bense pens ages | e /Contract Labor | | Travel in District Travel Out of Dis | quipment & Related Expense |
|--|--|-----|---|--|--------------------|--|--------------------------------|----------------------|-------|---|--------------------------------|
| 1 | Total pages Schedule F1: | 2 [| | IAME | | | | | 3 | Filer ID | (Ethics Commission Filers) |
| - | Sch: 9/42 Rpt: 93/126 | l | | A. (The Honoral | ble) | | | | 3 | 00081751 | (Luites Commission Filers) |
| 4 | Date | 5 F | Payee name | | | | | | | | |
| | 05/31/2025 | | | ative Studios | | | | | | | |
| 6 | Amount (\$) \$5,000.00 | 9 | Payee addres 1900 Fourna Ste. 560 Bellaire, TX | ice Place | State; | Zip Co | de | | | | |
| 8 | PURPOSE OF EXPENDITURE | | Category _{(See} | e Categories listed at the EXPENSE | e top of this sche | edule) | (b) | = | TX, | officeholder living | plete Schedule T. g expense |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/Oh | | andidate/Offic | eholder name | 0 | office sou | ght | | | Office he | eld |
| | Date 05/31/2025 | l | Payee name Bradley Crea | ative Studios | | | | | | | |
| | Amount (\$) \$1,000.00 | 9 | Payee addres 1900 Fourna Ste. 560 Bellaire, TX | ice Place | State; | Zip Coo | de | | | | |
| | PURPOSE OF EXPENDITURE | | Category _{(See} | e Categories listed at the Xpense | e top of this sche | edule) | (b) | — | , TX, | officeholder living | plete Schedule T. g expense |
| | Complete ONLY if direct expenditure to benefit C/OF | | andidate/Offic | eholder name | 0 | office sou | ght | | | Office he | eld |
| | Date 02/24/2025 | l | Payee name Brasserie 19 | ı | | | | | | | |
| | Amount (\$) \$609.19 | 1 | Payee addres L962 W. Gra Houston, TX | y St | State; | Zip Co | de | | | | |
| | PURPOSE | | | | ton of the | alula) | (h) | Description | | | |
| | OF EXPENDITURE | | | e Categories listed at the age Expense | e top of this sche | eaule) | (<i>)</i> | Check if travel | , TX, | officeholder living | plete Schedule T. J expense |
| | Complete ONLY if direct expenditure to benefit C/Oh | | andidate/Offic | eholder name | 0 | office sou | ght | | | Office he | eld |
| | | | | | | | | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (onter a category not listed above)

Solicitation/Fundraising Expense

Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 10/42 Rpt: Miller, Beau A. (The Honorable) 00081751 4 Date Payee name 04/01/2025 Bunnies on the Bayou 6 Amount (\$) Payee address; City; State; Zip Code \$520.15 P.O. Box 66832 Houston, TX 77266 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Bunnies on the Bayou Underwriter Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/30/2025 Cadence Amount (\$) Payee address; City; State; Zip Code \$2.00 201 S. Spring St. **Tupelo, MS 38804 PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense paper statement fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/30/2025 Cadence Amount (\$) Payee address: City: State; Zip Code \$2.00 201 S. Spring St. Tupelo, MS 38804 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense paper statement fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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 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: 11/42 Rpt: | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| | 04/30/2025 | Cadence |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$2.00 | 201 S. Spring St. |
| | | |
| | | Tupelo, MS 38804 |
| 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 paper statement fee |
| | | paper statement lee |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| ľ | expenditure to benefit C/OI | the state of the s |
| ⊨ | | |
| | Date | Payee name |
| L | 02/28/2025 | Cadence |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$2.00 | 201 S. Spring St. |
| | | |
| | | Tupelo, MS 38804 |
| | 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 |
| | | paper statement fee |
| ⊢ | Commiste ONII V if disent | Candidate/Officeholder name Office sought Office held |
| | Complete ONLY if direct expenditure to benefit C/OI | |
| ┡ | | |
| | Date | Payee name |
| | 01/31/2025 | Cadence |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$2.00 | 201 S. Spring St. |
| | | |
| | | Tupelo, MS 38804 |
| | 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. |
| | EXI ENDITORE | Check if Austin, TX, officeholder living expense |
| | | paper statement fee |
| L | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | experientare to benefit C/OI | <u> </u> |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 12/42 Rpt: | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| | 06/15/2025 | Competitve Edge |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$1,000.00 | 7373 Ardmore |
| | | |
| | | Houston, TX 77054 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Consulting Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense campaign services |
| | | cumpaign services |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | Date | Payee name |
| | 03/07/2025 | Constant Contact |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$826.44 | 1601 Trapelo Road |
| | | |
| | | Waltham, MA 02451 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense email services |
| | | Gillair Gol Viodo |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | Date | Payee name |
| | 06/01/2025 | Cypress-Tomball Democrats |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$30.00 | 12215 Moorcreek Dr. |
| | | |
| | | Houston, TX 77070 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. |
| | | Candidate/Officeholder/Political Committee |
| | | membership adds |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | | |
| | | |
| | | |

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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 | al 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: 13/42 Rpt: | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| L | 02/23/2025 | El Tiempo |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$596.25 | 2814 Navigation |
| | | |
| | | Houston, TX 77003 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense judges meeiting |
| | | judges meening |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| ľ | expenditure to benefit C/O | |
| H | Date | Payee name |
| | 05/30/2025 | El Tiempo |
| ┝ | Amount (\$) | Payee address; City; State; Zip Code |
| | \$267.37 | 2814 Navigation |
| | φ201.31 | 2014 Navigation |
| | | Haveton TV 77000 |
| L | | Houston, TX 77003 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | lunch w/ staff |
| | | |
| H | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | н |
| F | Date | Payee name |
| | 02/12/2025 | Escalantes |
| H | Amount (\$) | Payee address; City; State; Zip Code |
| | \$115.80 | 4053 Westheimer |
| | , | |
| | | Houston, TX 77027 |
| Н | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF | Food/Beverage Expense |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | | lunch with law clerks |
| | | |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | experiulture to benefit C/OI | п |
| | | |
| | | |
| | | |

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

| | Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 14/42 Rpt: | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| | 01/16/2025 | Four Seasons |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$28.15 | 1300 Lamar St. |
| | | |
| | | Houston, TX 77010 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF | Food/Beverage Expense |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | | judges meeting |
| | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | | |
| | Date | Payee name |
| | 06/24/2025 | GoDaddy |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$174.64 | 100 S Mill Ave |
| | | Ste. 1600 |
| | | Tempe, AZ 85281 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Office Overhead/Rental Expense |
| | | Check if Austin, TX, officeholder living expense |
| | | web hosting |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | Data | |
| | Date | Payee name |
| | 06/24/2025 | GoDaddy |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$196.64 | 100 S Mill Ave |
| | | Ste. 1600 |
| | | Tempe, AZ 85281 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Web hosting |
| | | indicated and the second of th |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | · · · · · · · · · · · · · · · · · · · |
| | | |
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| | | |

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 | | Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain | | ages | /Contract Labor | Travel Out of Dis OTHER (enter a | trict category not listed above) |
|----------|--|----------|--|------------|------|-------------------------------------|-------------------------------------|-------------------------------------|
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | 3 | Filer ID | (Ethics Commission Filers) |
| | Sch: 15/42 Rpt: | ı | Miller, Beau A. (The Honorable) | | | | 00081751 | , |
| 4 | Date | 5 | Payee name | | | | | |
| | 06/29/2025 | | GoDaddy | | | | | |
| 6 | Amount (\$) | 7 | Payee address; City; Stat | e; Zip Co | de | | | |
| | \$84.32 | | 100 S Mill Ave | | | | | |
| | | | Ste. 1600 | | | | | |
| | | | Tempe, AZ 85281 | | | | | |
| 8 | PURPOSE | (a) | Category (See Categories listed at the top of this so | chedule) | (b) | Description | | |
| | OF | | Office Overhead/Rental Expense | cricuale) | ` , | Check if travel outs | ide of Texas. Comp | olete Schedule T. |
| | EXPENDITURE | | • | | | Check if Austin, TX | , officeholder living | expense |
| | | | | | | web hosting | | |
| | | | | | | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | | andidate/Officeholder name | Office sou | ght | | Office he | eld |
| | | _ | | | | | | |
| | Date | | Payee name | | | | | |
| | 06/12/2025 | | GoDaddy | | | | | |
| | Amount (\$) | | Payee address; City; Stat | e; Zip Co | de | | | |
| | \$25.57 | | 100 S Mill Ave | | | | | |
| | | | Ste. 1600 | | | | | |
| | | | Tempe, AZ 85281 | | | | | |
| | PURPOSE | (a) | Category (See Categories listed at the top of this se | chedule) | (b) | Description | | |
| | OF EXPENDITURE | | Office Overhead/Rental Expense | | | Check if travel outs | | |
| | - | | | | | Check if Austin, TX wordpress renev | | expense |
| | | | | | | wordpress rene | wai | |
| \vdash | Complete ONLY if direct | <u> </u> | andidate/Officeholder name | Office sou | aht | | Office he | eld |
| | expenditure to benefit C/OI | | andidate/Officerolaer Hame | Omee sou | giit | | Office fic | ilu. |
| H | Date | | Payee name | | | | | |
| | 06/01/2025 | ı | Greater Heights Democratic Club | | | | | |
| | Amount (\$) | | | e; Zip Co | de | | | |
| | \$20.00 | ı | 1824 Spring St. | .,,, | | | | |
| | 420.00 | | gg c | | | | | |
| | | | Houston, TX 77007 | | | | | |
| | PURPOSE | | Category (See Categories listed at the top of this se | chedule) | (b) | Description | | |
| | OF EXPENDITURE | | Contributions/Donations Made By | : | | Check if travel outsi | | |
| | | | Candidate/Officeholder/Political Com | mittee | | membership du | - | expense |
| | | | | | | membership du | | |
| | Complete ONLY if direct | | andidate/Officeholder name | Office sou | aht | | Office he | eld |
| | expenditure to benefit C/OI | | and the second s | J55 554 | | | 211100 110 | · - |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| | 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: 16/42 Rpt: | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| | 02/14/2025 | HEB |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$116.78 | 1701 West Alabama |
| | | |
| | | Houston, TX 77098 |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | coffee for judges brunch |
| | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| | Date | Payee name |
| | 05/31/2025 | Harris County Tejano Democrats |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$100.00 | 3213 Houston Ave |
| | | |
| | | Houston, TX 77009 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. |
| | | Candidate/Officeholder/Political Committee |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| | Date | Payee name |
| | 05/14/2025 | Harrys |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$77.23 | 318 Taum |
| | | |
| | | Houston, TX 77006 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense campaign meeting |
| | | campaign meeting |
| | 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 Comm

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

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

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 17/42 Rpt: | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| | 06/01/2025 | Hispanic Bar Association of Houston |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$50.00 | PO Box 3611 |
| | | |
| | | Houston, TX 77253 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Contributions/Donations Made By |
| | | Candidate/Officeholder/Political Committee |
| | | membership dues |
| _ | Operation ONLY if allowed | One districts (Office healths are seen |
| 9 | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | · | |
| | Date | Payee name |
| | 02/26/2025 | Hotel Ella |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$532.36 | 1900 Rio Grande St. |
| | | |
| | | Austin, TX 78705 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense lodging for legislative agenda meeting |
| | | loaging for registative agenda meeting |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| | | |
| | Date | Payee name |
| | 06/27/2025 | Hotel Saint Augustine |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$9,259.45 | 4110 Loretto Dr |
| | | |
| | | Houston, TX 77006 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Food/Beverage Expense |
| | ZA ZADITORZ | Check if Austin, TX, officeholder living expense |
| | | fundraiser expenses |
| _ | Operation ONE VIII II | Open Higher (Office health a group of the control o |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | p = 1 2 25 3/01 | |
| | | |
| L | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 18/42 Rpt: | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| | 05/31/2025 | Houston Black American Democrats |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$100.00 | P.O. Box 21163 |
| | | |
| | | Houston, TX 77226 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Event Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense event ticket |
| | | event tionet |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| 9 | expenditure to benefit C/O | |
| _ | Date | Davisa nama |
| | 05/31/2025 | Payee name Houston LGBTQ+ Political Caucus |
| | | - |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$40.00 | PO BOX 66664 |
| | | |
| | | Houston, TX 77266 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. |
| | | Candidate/Officeholder/Political Committee |
| | | membership dues |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| _ | Date | Davies same |
| | 06/12/2025 | Payee name Houston Young Lawyers Association |
| | | |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$500.00 | PO Box 61208 |
| | | |
| | | Houston, TX 77208 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. |
| | | Candidate/Officeholder/Political Committee |
| | | ouncteenth sponsorship |
| _ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| _ | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

ense rrave ense Trave des/Contract Labor OTHE

| | 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: 19/42 Rpt: | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| | 05/20/2025 | Inkstringer |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$82.00 | 123 Requested |
| | | |
| | | Houston, TX 77002 |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | placard printing |
| | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | 1 |
| | Date | Payee name |
| | 06/01/2025 | International Association of LGBTQ+ Judges |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$100.00 | PO Box 122724 |
| | | |
| | | San Diego, CA 92112 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. |
| | | Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense membership dues |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | 1 |
| | Date | Payee name |
| | 06/01/2025 | Kingwood Area Democrats |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$25.00 | 3607 Sweetgum Hill Ln. |
| | | |
| | | Kingwood, TX 77345 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. |
| | | Candidate/Officeholder/Political Committee |
| | | membership dues |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| | Credit Card Payment | The Instruction Guide explains how to complete this form. |
|---|-----------------------------|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 20/42 Rpt: | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| | 06/05/2025 | Kwik Kopy |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$63.87 | 1405 Waugh |
| | | |
| | | Houston, TX 77019 |
| 8 | PURPOSE | |
| ľ | OF | (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | | printing expense |
| | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| | Date | Payee name |
| | 01/30/2025 | La Griglia |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$205.65 | 2817 W. Dallas |
| | ¥=3333 | |
| | | Houston, TX 77019 |
| | DUDDOCE | |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) Food/Reverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | judges meeting |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| | Date | Payee name |
| | 01/02/2025 | La Griglia |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$421.16 | 2817 W. Dallas |
| | | |
| | | Houston, TX 77019 |
| | PURPOSE | |
| | OF | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | | dinner with new judges |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| | | |
| | | |
| ı | | |

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

| Candidate/Officeholder/Politi Credit Card Payment | cal Committee Legal Services Salaries/wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|--|--|
| 1 Total pages Schedule F1 | : 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 21/42 Rpt: | Miller, Beau A. (The Honorable) 00081751 |
| 4 Date | 5 Payee name |
| 01/15/2025 | La Griglia |
| 6 Amount (\$) \$44.17 | |
| | Houston, TX 77019 |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense lunch with judges |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/ | Candidate/Officeholder name Office sought Office held OH |
| Date | Payee name |
| 05/07/2025 | La Griglia |
| Amount (\$) \$96.28 | Payee address; City; State; Zip Code 2817 W. Dallas |
| | Houston, TX 77019 |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign meeting |
| Complete ONLY if direct expenditure to benefit C/ | Candidate/Officeholder name Office sought Office held OH |
| Date | Payee name |
| 04/24/2025 | La Palapa |
| Amount (\$) \$39.59 | Payee address; City; State; Zip Code 1110 Preston |
| | Houston, TX 77002 |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense breakfast for staff |
| Complete ONLY if direct expenditure to benefit C/ | L Candidate/Officeholder name Office sought Office held OH |
| | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
sing Expense Event Expense Loan Repayment/Reimbu

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

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

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

| | Credit Card Payment | The Instruction Guide explains how to complete this form. | |
|---|---------------------------------------|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 22/42 Rpt: | Miller, Beau A. (The Honorable) | 00081751 |
| 4 | Date | 5 Payee name | |
| | 06/01/2025 | McNiel, Kathryn | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | |
| | \$384.18 | 4711 Yoakum Blvd. | |
| | | | |
| | | Houston, TX 77006 | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF EXPENDITURE | 2 Eddi Repayment Remisarsement | l outside of Texas. Complete Schedule T. n, TX, officeholder living expense |
| | | reimburseme | |
| | | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| | expenditure to benefit C/OF | H | |
| | Date | Payee name | |
| | 05/31/2025 | McNiel, Kathryn | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$2,500.00 | 4711 Yoakum Blvd. | |
| | ! | | |
| | ! | Houston, TX 77006 | |
| F | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF EXPENDITURE | Consulting Expense | l outside of Texas. Complete Schedule T. |
| | · · · · · · · · · · · · · · · · · · · | Check if Austii | n, TX, officeholder living expense |
| | ! | | TVICES |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| | expenditure to benefit C/OI | н | |
| | Date | Payee name | |
| | 05/23/2025 | McNiel, Kathryn | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$9,000.00 | 4711 Yoakum Blvd. | |
| | | | |
| | | Houston, TX 77006 | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| | OF EXPENDITURE | Consulting Expense | l outside of Texas. Complete Schedule T. |
| | | Check if Austii | n, TX, officeholder living expense |
| | | Campaign 30 | TVICCS |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| | expenditure to benefit C/O | | Since field |
| | | | |
| | | | |
| | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

| | Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide | ense Print Sala | - | se s/Contract Labor | | Travel in District Travel Out of Dis OTHER (enter a | trict category not listed above) |
|---|---|-----------------------|---|---------------------|----------|------------------------|--------|---|-------------------------------------|
| 1 | Total pages Schedule F1: | | | | | | I | Filer ID | (Ethics Commission Filers) |
| L | Sch: 23/42 Rpt: | Miller, Be | eau A. (The Honorable | 2) | | | | 00081751 | |
| 4 | Date | 5 Payee na | me | | | | | | |
| | 05/20/2025 | McNiel, I | Kathryn | | | | | | |
| 6 | Amount (\$) | 7 Payee ad | dress; City; | State; Zip | Code | | | | |
| | \$1,400.00 | 4711 Yo | akum Blvd. | | | | | | |
| | | | | | | | | | |
| | | Houston | , TX 77006 | | | | | | |
| 8 | PURPOSE | (a) Category | (See Categories listed at the to | p of this schedule) | (b) | Description | | | |
| | OF EXPENDITURE | | payment/Reimbursem | | | | outsid | e of Texas. Com | plete Schedule T. |
| | LAI LADITORE | | | | | ш | | officeholder living | expense |
| | | | | | | reimburseme | HIL | | |
| _ | Complete ONII V if direct | Condidat-1 | Officeholder | Off: | | | | Office I | .id |
| 9 | Complete ONLY if direct expenditure to benefit C/Oh | | Officeholder name | Опісе | sought | | | Office he | eiu |
| | Date | Payee na | me | | | | | | |
| | 03/14/2025 | McNiel, I | Kathryn | | | | | | |
| | Amount (\$) | Payee ad | dress; City; | State; Zip | Code | | | | |
| | \$270.00 | 4711 Yo | akum Blvd. | | | | | | |
| | | | | | | | | | |
| | | Houston | , TX 77006 | | | | | | |
| | PURPOSE | (a) Category | (See Categories listed at the to | p of this schedule) | (b) | Description | | | |
| | OF EXPENDITURE | | ng Expense | | | — | | | plete Schedule T. |
| | | | | | | | | officeholder living | expense |
| | | | | | | campaign sei | VICE | | |
| _ | Complete ONLY if direct | Candidate/ | Officeholder name | Office | sought | | | Office he | eld |
| | expenditure to benefit C/O | | Cincendide Hame | Onice | , sought | | | Office He | |
| - | Date | Dove a re- | | | | | | | |
| | Date 01/25/2025 | Payee na McNiel, I | | | | | | | |
| | | | - | Ctoto: 7' | . Cod- | | | | |
| | Amount (\$) \$135.00 | Payee ad | dress; City; akum Blvd. | State; Zip | coae | | | | |
| | Φ135.00 | 4/11 10 | akuiii Divu. | | | | | | |
| | | Houston | , TX 77006 | | | | | | |
| | PURPOSE OF | | (See Categories listed at the to | p of this schedule) | (b) | Description | | | |
| | EXPENDITURE | Consultir | ng Expense | | | | | e of Texas. Comp officeholder living | olete Schedule T. |
| | | | | | | computer wor | | omeenoluer livilig | спропос |
| | | | | | | - 1- 3-1 | | | |
| | Complete ONLY if direct | Candidate/ | Officeholder name | Office | sought | | | Office he | eld |
| | expenditure to benefit C/O | | | | 3 | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|----------|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| • | Sch: 24/42 Rpt: | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| | 05/31/2025 | Mexican American Bar Association of Houston |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$75.00 | P. O. Box 303 |
| | | |
| | | Houston, TX 77001 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF | Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Candidate/Officeholder/Political Committee |
| | | membership dues |
| | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | | |
| | Date | Payee name |
| | 05/31/2025 | Meyerland Area Democrats |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$36.00 | P.O. Box 310061 |
| | | |
| | | Houston, TX 77231 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. |
| | | Candidate/Officeholder/Political Committee |
| | | membership dues |
| _ | Complete ONLY if direct | Condidate/Office held |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| H | Date | Payee name |
| | 05/23/2025 | Michel, Bryant |
| \vdash | Amount (\$) | |
| | \$6,000.00 | Payee address; City; State; Zip Code 3307 Deeds Rd |
| | \$6,000.00 | 3307 Deeds Ru |
| | | |
| | | Houston, TX 77084 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Consulting Expense Check if travel outside of Texas. Complete Schedule T. |
| | LAFENDITORE | Check if Austin, TX, officeholder living expense |
| | | campaign services |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | 1 |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| | Credit Card Payment | The Instruction Guide explains how to complete this form. | |
|----------|---|--|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) | _ |
| | Sch: 25/42 Rpt: | Miller, Beau A. (The Honorable) 00081751 | |
| 4 | Date | 5 Payee name | _ |
| | 02/26/2025 | Miller, Beau | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | _ |
| | \$235.00 | PO Box 667204 | |
| | | | |
| | | Houston, TX 77266 | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | - |
| | OF | Travel In District Check if travel outside of Texas. Complete Schedule T. | |
| l | EXPENDITURE | Check if Austin, TX, officeholder living expense | |
| l | | mileage for Austin trip | |
| L | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held | |
| L | experientare to benefit 6/61 | | |
| | Date | Payee name | |
| l | 04/09/2025 | Miller, Beau | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| l | \$235.00 | PO Box 667204 | |
| l | | | |
| l | | Houston, TX 77266 | |
| Г | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | _ |
| l | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. | |
| l | | Check if Austin, TX, officeholder living expense | |
| | | mileage for Austin trip | |
| ⊢ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | _ |
| | expenditure to benefit C/O | | |
| ⊨ | D-4- | | = |
| | Date 06/01/2025 | Payee name National Bar Association | |
| L | | | _ |
| l | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$250.00 | 1816 12th St. NW | |
| | | 4th Floor | |
| L | | Washington, DC 20009 | |
| l | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| l | EXPENDITURE | Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | |
| | | membership dues | |
| | | | |
| \vdash | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | _ |
| | expenditure to benefit C/O | | |
| | | | _ |
| | | | |
| | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | nmittee Legal Serv | s/Memorials Expense rices ruction Guide exp | Salaries/V | Vages | /Contract Labor | | Travel Out of Dis OTHER (enter a | strict category not listed al | oove) |
|---|--|----------|---------------------------------------|---|----------------|-------|-----------------|------|---|----------------------------------|--------------|
| 1 | Total pages Schedule F1: | 2 | FII FR NAME | | | | | 3 | Filer ID | (Ethics Commiss | sion Filers) |
| Ĺ | Sch: 26/42 Rpt: | Ĺ | Miller, Beau A. (Th | e Honorable) | | | | | 00081751 | (| |
| 4 | Date | 5 | Payee name | | | | | | | | |
| | 02/14/2025 | | Ninfas | | | | | | | | |
| 6 | Amount (\$) \$41.04 | 7 | Payee address; 0 2704 Navigation | City; | State; Zip Co | de | | | | | |
| | | ⊢ | Houston, TX 77003 | | | | | | | | |
| 8 | PURPOSE | (a) | Category (See Categori | | this schedule) | (b) | Description | | | | |
| | OF EXPENDITURE | | Food/Beverage Ex | pense | | | | | | plete Schedule T. | |
| | | | | | | | ш | IX, | officeholder living | g expense | |
| | | | | | | | judges lunch | | | | |
| 9 | Complete ONLY if direct | <u> </u> | Candidate/Officeholder | r namo | Office sou | abt | | | Office he | ald | |
| 9 | expenditure to benefit C/OI | | candidate/Officeriolder | name | Office Sou | gni | | | Office fit | =iu | |
| | Date | | Payee name | | | | | | | | |
| | 06/01/2025 | | Oak Forest Area D | emocrats | | | | | | | |
| | Amount (\$) | | Payee address; (| City; | State; Zip Co | de | | | | | |
| | \$15.00 | | 1046 Stonecrest D | r. | | | | | | | |
| | | | | | | | | | | | |
| | | ⊢ | Houston, TX 77018 | | | | | | | | |
| | PURPOSE OF | (a) | Category (See Categori | | | (b) | Description | | | | |
| | EXPENDITURE | | Contributions/Dona Candidate/Officeho | | | | = | | officeholder living | plete Schedule T. | |
| | | | Candidate/Officerio | ildel/Political C | ommittee | | membership (| | | у схренас | |
| | | | | | | | membership (| auc | ,5 | | |
| | Complete ONLY if direct expenditure to benefit C/O | | Candidate/Officeholder | name | Office sou | ght | | | Office he | eld | |
| | experialitare to benefit e/or | | | | | | | | | | |
| | Date | | Payee name | | | | | _ | | | |
| L | 04/08/2025 | L | Perry's Steakhouse | <u> </u> | | | | | | | |
| | Amount (\$) | _ | Payee address; (| City; | State; Zip Co | de | | | | | |
| | \$231.68 | | 114 W. 7th St. | | | | | | | | |
| | | | | | | | | | | | |
| | | | Austin, TX 78701 | | | | | | | | |
| | PURPOSE OF | (a) | Category (See Categori | | this schedule) | (b) | Description | | d4.T-: 0 | -l-t- 0-b- ' ' - | |
| | EXPENDITURE | | Food/Beverage Ex | pense | | | | | de of Texas. Com officeholder living | plete Schedule T. | |
| | | | | | | | dinner in Aust | | | | |
| | | | | | | | annier in Aust | .111 | ioi iogisiativ | c meenings | |
| | Complete ONLY if direct | <u> </u> | Candidate/Officeholder | name | Office sou | aht | | | Office he | eld | |
| | expenditure to benefit C/OI | | | | 220 000 | J • | | | 200 110 | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
rertising Expense Event Expense Loan Repayment/Reimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

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

| | 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: 27/42 Rpt: | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| | 05/31/2025 | ROAD Women |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$100.00 | P. O. Box 22678 |
| | | |
| | | Houston, TX 77227 |
| 8 | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Event Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense event ticket |
| | | CVOIL HORCE |
| Ļ | Compulate ONII V if diseast | Condidate/Officeholder neme |
| 9 | Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| L | <u> </u> | |
| | Date | Payee name |
| | 05/30/2025 | Raise the Money |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$4,826.74 | P.O. Box 26466 |
| | | |
| | | Little Rock, AR 72221 |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | credit card fees |
| | | Great data loos |
| ⊢ | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/O | · · · · · · · · · · · · · · · · · · · |
| L | | |
| | Date | Payee name |
| | 06/30/2025 | Raise the Money |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$5,791.23 | P.O. Box 26466 |
| | | |
| | | Little Rock, AR 72221 |
| 1 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| l | OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| | 2/11/2/11/01/12 | Check if Austin, TX, officeholder living expense |
| 1 | | credit card fees |
| L | 0 1: 0::::::::::::::::::::::::::::::::: | |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| L | S. portantare to borient 0/01 | • |
| | | |
| | | |
| <u> </u> | | |

SCHEDULE F1

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

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

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

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | | ages/Contract Labor | | Travel Out of Dis OTHER (enter a | strict category not listed above) | |
|---|--|--|-----------------|---------------------|---------|---|--------------------------------------|------|
| 1 | Total pages Schedule F1: | LER NAME | | | 3 | Filer ID | (Ethics Commission File | ers) |
| | Sch: 28/42 Rpt: | liller, Beau A. (The Honorable) | | | | 00081751 | | -, |
| 4 | Date | ayee name | | | | | | |
| | 06/01/2025 | ice Democrats | | | | | | |
| 6 | Amount (\$) | ayee address; City; State; | Zip Co | de | | | | |
| | \$20.00 | 9 Sunset Blvd. #311 | | | | | | |
| | | | | | | | | |
| | | ouston, TX 77005 | | | | | | |
| 8 | PURPOSE | ategory (See Categories listed at the top of this sched | dulo) | (b) Description | າ | | | |
| | OF | ontributions/Donations Made By | aule) | | | de of Texas. Com | plete Schedule T. | |
| | EXPENDITURE | andidate/Officeholder/Political Commit | ttee | = | | officeholder living | | |
| | | | | members | hip due | es | | |
| | | | | | | | | |
| 9 | Complete ONLY if direct | ndidate/Officeholder name Of | ffice sou | ght | | Office he | eld | |
| | expenditure to benefit C/OI | | | | | | | |
| | Date | ayee name | | | | | | |
| | 05/19/2025 | oma's Pizza | | | | | | |
| | Amount (\$) | ayee address; City; State; | Zip Co | de | | | | |
| | \$144.35 | 33 Main St. | | | | | | |
| | | | | | | | | |
| | | ouston, TX 77002 | | | | | | |
| | PURPOSE OF | ategory (See Categories listed at the top of this sched | dule) | (b) Description | | | | |
| | EXPENDITURE | ood/Beverage Expense | | = | | de of Texas. Com officeholder living | | |
| | | | | staff and i | | | , capelloc | |
| | | | | Julia i | | | | |
| H | Complete ONLY if direct | ndidate/Officeholder name Of | ffice sou | ght | | Office he | eld | |
| | expenditure to benefit C/O | | • | - | | | | |
| H | Date | ayee name | | | | | | |
| | 06/01/2025 | ABA Houston | | | | | | |
| | Amount (\$) | | Zip Co | de | | | | |
| | \$75.00 | 701 Kirby Dr. | p 00 | | | | | |
| | Ψ. σ.σσ | te. 530 | | | | | | |
| | | | | | | | | |
| | | ouston, TX 77098 | i | | | | | |
| | PURPOSE OF | ategory (See Categories listed at the top of this sched | dule) | (b) Description | | do of Toyon Com | nloto Schodulo T | |
| | EXPENDITURE | ontributions/Donations Made By andidate/Officeholder/Political Commit | ttee | | | de of Texas. Com officeholder living | | |
| | | andidate/Onicendide//Fullical Cullillill | uc c | members | | | , - fr= | |
| | | | | | , | | | |
| | Complete ONLY if direct | ndidate/Officeholder name Of | ffice sou | ght | | Office he | eld | |
| | expenditure to benefit C/O | | • | = | | | | |
| | | | | | | | | |
| | | | | | | | | |
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SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|---|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 29/42 Rpt: | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| | 05/31/2025 | Southwest Democrats |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$100.00 | PO Box 2053 |
| | | |
| | | Bellaire, TX 77402 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Contributions/Donations Made By |
| | LAFENDITORE | Candidate/Officeholder/Political Committee |
| | | membership dues |
| | | |
| 9 | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | Date | Payee name |
| | 06/01/2025 | Spring Branch Democrats |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$20.00 | P.O. 550161 |
| | Ψ20.00 | 1.0.330101 |
| | | |
| | | Houston, TX 77255 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. |
| | | Candidate/Officeholder/Political Committee |
| | | membership dues |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | Complete ONLY if direct expenditure to benefit C/OI | |
| | , | |
| | Date | Payee name |
| | 06/01/2025 | Spring Branch Democrats |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$20.00 | P.O. 550161 |
| | | |
| | | Houston, TX 77255 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF | Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Candidate/Officeholder/Political Committee |
| | | membership dues |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OF | 1 |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---|--|---|
| 1 | Total pages Schedule F1: | |
| | Sch: 30/42 Rpt: | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| | 02/25/2025 | Subway |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$16.58 | 2458 E Austin St |
| | | Ste 110 |
| | | Giddings, TX 78942 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense dinner back from Legislature meetings |
| | | diffici back from Legislature meetings |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | Date | Payee name |
| | 05/30/2025 | TACTAS |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$10,000.00 | 609 Main St. |
| | | 40th FI |
| | | Houston, TX 77002 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. |
| | | Candidate/Officeholder/Political Committee |
| | | , wat as a minor sponsoromp |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | -1 |
| | Date | Payee name |
| | 06/01/2025 | Texas Democratic Woman of Harris County Metro Area |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$20.00 | 766 Thornbranch Dr. |
| | | |
| | | Houston, TX 77079 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. |
| | | Candidate/Officeholder/Political Committee |
| | | membership dues |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| | | |
| | | |
| | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| | Credit Card i dyment | The Instruction Guide explains how to com | ple | ete this form. |
|---|---|--|-----|---|
| 1 | Total pages Schedule F1: | 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 31/42 Rpt: | Miller, Beau A. (The Honorable) | | 00081751 |
| 4 | Date | 5 Payee name | | - |
| | 06/13/2025 | The Otis | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | e | |
| | \$464.22 | 1901 San Antonio | | |
| | | | | |
| | | Austin, TX 78705 | | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) | b) | Description |
| | OF | Travel In District | | Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | | | Check if Austin, TX, officeholder living expense |
| | | | | lodging for appellate conference |
| | | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sough | nt | Office held |
| | | | | |
| | Date | Payee name | | |
| | 02/25/2025 | The Roaring Fork | | |
| | Amount (\$) | Payee address; City; State; Zip Code | е | |
| | \$57.67 | 701 Congress Ave. | | |
| | | | | |
| | | Austin, TX 78701 | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) | b) | Description |
| | OF EXPENDITURE | Food/Beverage Expense | | Check if travel outside of Texas. Complete Schedule T. |
| | | | | Check if Austin, TX, officeholder living expense TMCP conference dinner |
| | | | | Tivier conference diffici |
| | Complete ONLY if direct | Candidate/Officeholder name Office sough | ht | Office held |
| | expenditure to benefit C/OI | | | 000 1.0.0 |
| | Date | Payee name | | |
| | 05/04/2025 | Tifany's | | |
| | | Payee address; City; State; Zip Code | | |
| | Amount (\$) \$175.90 | 5015 Westheimer | C | |
| | Ψ173.30 | 3013 Westileline | | |
| | | Houston TV 77056 | | |
| | | Houston, TX 77056 | | |
| | PURPOSE OF | , | b) | Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Gift/Awards/Memorials Expense | | Check if Austin, TX, officeholder living expense |
| | | | | outgoing judges gift |
| | | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sough | ht | Office held |
| | expenditure to benefit C/OI | 1 | | |
| _ | | | | |
| | | | | |
| | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| | Credit Card Payment | The Instruction Guide explains how to comple | ete this form. |
|---|--|---|---|
| 1 | Total pages Schedule F1: Sch: 32/42 Rpt: | FILER NAME Miller, Beau A. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 01/28/2025 | 5 Payee name Treebeards | - |
| 6 | Amount (\$) \$36.81 | 7 Payee address; City; State; Zip Code 1117 Texas Ave. | |
| 8 | PURPOSE OF EXPENDITURE | Houston, TX 77002 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) | Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense lunch w. law clerk |
| 9 | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought | Office held |
| | Date 02/14/2025 | Payee name Treebeards | |
| | Amount (\$) \$11.37 | Payee address; City; State; Zip Code 1117 Texas Ave. | |
| | PURPOSE OF EXPENDITURE | Food/Beverage Expense | Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense lunch w/ judge |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought | Office held |
| | Date 05/12/2025 | Payee name Treebeards | |
| | Amount (\$) \$35.18 | Payee address; City; State; Zip Code 1117 Texas Ave. | |
| | | Houston, TX 77002 | |
| | PURPOSE OF EXPENDITURE | Food/Beverage Expense | Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense lunch with intern |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought | Office held |
| | | | |

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

| | Credit Card Payment | | The Instruction Guide explains how to c | ompl | lete this form. |
|---|---|------------|--|-------|--|
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 33/42 Rpt: | | Miller, Beau A. (The Honorable) | | 00081751 |
| 4 | Date | 5 | Payee name | | <u>'</u> |
| | 04/28/2025 | | Treebeards | | |
| 6 | Amount (\$) | 7 | Payee address; City; State; Zip C | ode | |
| | \$40.05 | | 1117 Texas Ave. | | |
| | | | | | |
| | | | Houston, TX 77002 | | |
| 8 | PURPOSE | (a | Category (See Categories listed at the top of this schedule) | (b) | Description |
| | OF EXPENDITURE | ` <i>`</i> | Food/Beverage Expense | `´ | Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | | 3 1 | | Check if Austin, TX, officeholder living expense |
| | | | | | lunch with law clerks |
| | | | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/Ol | | Candidate/Officeholder name Office so | ught | Office held |
| | | _ | | | |
| | Date | | Payee name | | |
| | 04/25/2025 | | Treebeards | | |
| | Amount (\$) | | Payee address; City; State; Zip C | ode | |
| | \$44.38 | | 1117 Texas Ave. | | |
| | | | | | |
| | | | Houston, TX 77002 | | |
| | PURPOSE | (a | Category (See Categories listed at the top of this schedule) | (b) | Description |
| | OF EXPENDITURE | | Food/Beverage Expense | | Check if travel outside of Texas. Complete Schedule T. |
| | | | | | Check if Austin, TX, officeholder living expense lunch w/ staff |
| | | | | | idileti W Stali |
| | Complete ONLY if direct | | Candidate/Officeholder name Office so | napt | Office held |
| | expenditure to benefit C/O | | Carranator Cinico India Francis | agiit | |
| | Date | Т | Davis name | | |
| | 06/24/2025 | | Payee name Treebeards | | |
| | | \vdash | | odo | |
| | Amount (\$) \$100.42 | | Payee address; City; State; Zip C 1117 Texas Ave. | oue | |
| | Φ100.42 | | IIII Texas Ave. | | |
| | | | Houston TV 77002 | | |
| | | | Houston, TX 77002 | 1 | |
| | PURPOSE OF | (a) | Category (See Categories listed at the top of this schedule) | (b) | Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | | Food/Beverage Expense | | Check if dayer outside of Texas. Complete Schedule 1. |
| | | | | | lunch w. intern |
| | | | | | |
| | Complete ONLY if direct | | Candidate/Officeholder name Office so | ught | Office held |
| | expenditure to benefit C/O | Н | | | |
| _ | | | | | |
| | | | | | |
| | | | | | |

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

| | Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|----------|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| | Sch: 34/42 Rpt: | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| | 06/26/2025 | Treebeards |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$54.27 | 1117 Texas Ave. |
| | | |
| | | Houston, TX 77002 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense lunch w. intern |
| | | iunch w. intern |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/OI | |
| ⊨ | Data | |
| | Date | Payee name |
| | 04/08/2025 | Uber |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$13.53 | 1725 Third Street |
| | | |
| | | San Francisco, CA 94158 |
| Г | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| | LXI LINDITORL | Check if Austin, TX, officeholder living expense |
| | | car service for austin meetings |
| L | Operation ONLY & Street | Overall data (Office health and over a complete section of the sec |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| ┕ | | |
| | Date | Payee name |
| | 04/05/2025 | Uber |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$64.15 | 1725 Third Street |
| | | |
| | | San Francisco, CA 94158 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense |
| | | car service from UH Law Gala |
| \vdash | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| I | expenditure to benefit C/OI | |
| \vdash | | |
| | | |
| | | |

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

| | Credit Card Payment | The Instruction Guide explains how to comple | ete this form. |
|---|---|---|---|
| 1 | Total pages Schedule F1: Sch: 35/42 Rpt: | FILER NAME Miller, Beau A. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081751 |
| 4 | Date 04/05/2025 | 5 Payee name Uber | |
| 6 | Amount (\$) \$71.42 | 7 Payee address; City; State; Zip Code 1725 Third Street | |
| 8 | PURPOSE OF EXPENDITURE | San Francisco, CA 94158 (a) Category (See Categories listed at the top of this schedule) Travel In District (b) | Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense car service to UH Law Gala |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought | Office held |
| | Date 04/03/2025 | Payee name Uber | |
| | Amount (\$) \$16.80 | Payee address; City; State; Zip Code 1725 Third Street San Francisco, CA 94158 | |
| | PURPOSE OF EXPENDITURE | | Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense car service from AWA Lunch |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought | Office held |
| | Date 04/03/2025 | Payee name Uber | |
| | Amount (\$) \$13.61 | Payee address; City; State; Zip Code 1725 Third Street | |
| | | San Francisco, CA 94158 | |
| | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District (b) | Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense car service to AWA lunch |
| | 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 Committe

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: 36/42 Rpt: | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| | 04/09/2025 | Uber |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$18.15 | 1725 Third Street |
| | | |
| | | San Francisco, CA 94158 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense car service to capital |
| | | cai service to capital |
| _ | 0 1: 0 11 1 1 | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | | |
| | Date | Payee name |
| | 04/08/2025 | Uber |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$18.38 | 1725 Third Street |
| | | |
| | | San Francisco, CA 94158 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense car service from dinner in Austin |
| | | cai service from diffiner in Adstin |
| _ | Operation ONLY if allowed | On did to 10 ff as hald a grant Off as south |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | • | |
| | Date | Payee name |
| | 04/09/2025 | Uber |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$15.85 | 1725 Third Street |
| | | |
| | | San Francisco, CA 94158 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense |
| | | car service from capital |
| | Complete ONII V if allowers | Condidate/Officeholder name |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | , | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

| | Credit Card Payment | The Instruction Guide explains how to com | nple | ete this form. |
|---|-----------------------------|--|------|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 37/42 Rpt: | Miller, Beau A. (The Honorable) | | 00081751 |
| 4 | Date | 5 Payee name | | <u>'</u> |
| | 06/20/2025 | Uber | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Cod | le | |
| | \$34.18 | 1725 Third Street | | |
| | | | | |
| | | San Francisco, CA 94158 | | |
| 8 | PURPOSE OF | , , , | (b) | Description |
| | EXPENDITURE | Travel In District | | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | | | car service to campaign meeting |
| | | | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office soug | ht | Office held |
| | expenditure to benefit C/OI | 1 | | |
| | Date | Payee name | | |
| | 06/26/2025 | Uber | | |
| | Amount (\$) | Payee address; City; State; Zip Cod | le | |
| | \$45.01 | 1725 Third Street | | |
| | | | | |
| l | | San Francisco, CA 94158 | | |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) | (b) | Description |
| l | EXPENDITURE | Travel In District | | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| l | | | | car service to campaign meeting |
| l | | | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office soug | ht | Office held |
| | expenditure to benefit C/OI | 1 | | |
| | Date | Payee name | | |
| l | 06/26/2025 | Uber | | |
| | Amount (\$) | Payee address; City; State; Zip Cod | le | |
| | \$51.09 | 1725 Third Street | | |
| | | | | |
| | | San Francisco, CA 94158 | | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) | Description |
| | OF EXPENDITURE | Travel In District | | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | | | car service from campaign meeting |
| | | | | , 5 |
| | Complete ONLY if direct | Candidate/Officeholder name Office soug | ht | Office held |
| | expenditure to benefit C/OI | | | |
| | | | | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| | Credit Card Payment | The Instruction Guide explains how to complete | e this form. |
|---|---|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 38/42 Rpt: | Miller, Beau A. (The Honorable) | 00081751 |
| 4 | Date | 5 Payee name | · |
| | 04/08/2025 | Uber | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | |
| | \$17.38 | 1725 Third Street | |
| | | | |
| | | San Francisco, CA 94158 | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) D | Description |
| | OF | Travel In District | Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | [| Check if Austin, TX, officeholder living expense |
| l | | C | ar service in Austin |
| Ļ | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought | Office held |
| ┕ | ' | | |
| | Date | Payee name | |
| L | 04/06/2025 | Uber | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$17.15 | 1725 Third Street | |
| | | | |
| l | | San Francisco, CA 94158 | |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) | Description |
| l | OF EXPENDITURE | Travel In District | Check if travel outside of Texas. Complete Schedule T. |
| l | | L | ☐ Check if Austin, TX, officeholder living expense ar service in Austin |
| l | | | ac solvies in / tastin |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| | expenditure to benefit C/OI | | |
| H | Date | Payee name | |
| l | 02/20/2025 | Uber | |
| ⊢ | Amount (\$) | Payee address; City; State; Zip Code | |
| l | \$70.56 | 1725 Third Street | |
| | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| l | | San Francisco, CA 94158 | |
| _ | PURPOSE | | No content our |
| | OF | (a) Category (See Categories listed at the top of this schedule) Travel In District | Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Traver in District | Check if Austin, TX, officeholder living expense |
| | | | ar service |
| L | | | |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought | Office held |
| | experiulture to beliefit C/OI | 1 | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| | Candidate/Officenoider/Politica | The Instruction Guide explains how to complete this form. |
|---|---|--|
| 1 | Total pages Schedule F1: | |
| | Sch: 39/42 Rpt: | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| | 04/05/2025 | Uber |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$62.10 | 1725 Third Street |
| | | |
| | | San Francisco, CA 94158 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense |
| | | car service |
| _ | Opening ONE V if direct | Open Hights (Office Includes a constant of the |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | | |
| | Date | Payee name |
| | 04/05/2025 | Uber |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$55.78 | 1725 Third Street |
| | | |
| | | San Francisco, CA 94158 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| | LAFEINDITORE | Check if Austin, TX, officeholder living expense |
| | | car service |
| | | |
| | Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | | |
| | Date | Payee name |
| | 06/28/2025 | Uber |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$18.70 | 1725 Third Street |
| | | |
| | | San Francisco, CA 94158 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | | car service |
| | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| | expenditure to benefit C/Ol | 1 |
| | | |
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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 Salaries (Contract Labor

| | 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: 40/42 Rpt: | Miller, Beau A. (The Honorable) 00081751 |
| 4 | Date | 5 Payee name |
| | 06/28/2025 | Uber |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code |
| | \$23.85 | 1725 Third Street |
| | | |
| | | San Francisco, CA 94158 |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Car service |
| | | cai service |
| _ | Complete ONU V if alice | Condidate/Officeholder name Office sought |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | | |
| | Date | Payee name |
| | 06/28/2025 | Uber |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$24.56 | 1725 Third Street |
| | | |
| | | San Francisco, CA 94158 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense Car service |
| | | cai service |
| | Complete ONLY if direct | Condidate/Officeholder name Office cought Office hold |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | | |
| | Date | Payee name |
| | 04/09/2025 | W Austin |
| | Amount (\$) | Payee address; City; State; Zip Code |
| | \$45.05 | 200 Lavaca St. |
| | | |
| | | Austin, TX 78701 |
| | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| | OF EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. |
| | ZA ZADITORZ | Check if Austin, TX, officeholder living expense |
| | | breakfast in Austin for lege meetings |
| _ | Operation ONE VIII II | On didn't 10 ff a balden name |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | Orialia.o to bollone of of | |
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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

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

| Credit Card Payment | The Instruction Guide explains how to co | omplete this form. |
|--|--|--|
| 1 Total pages Schedule F | 1: 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| Sch: 41/42 Rpt: | Miller, Beau A. (The Honorable) | 00081751 |
| 4 Date | 5 Payee name | - |
| 04/09/2025 | W Austin | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Co | ode |
| \$755.9 | 9 200 Lavaca St. | |
| | | |
| | Austin, TX 78701 | |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| OF | Travel In District | Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | | Check if Austin, TX, officeholder living expense |
| | | lodging for legislative agenda meeting |
| | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C | | ught Office held |
| | | |
| Date | Payee name | |
| 06/01/2025 | West U Democrats | |
| Amount (\$) | Payee address; City; State; Zip Co | ode |
| \$25.0 | 0 4070 Nenana Dr | |
| | | |
| | Houston, TX 77025 | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| OF EXPENDITURE | Contributions/Donations Made By | Check if travel outside of Texas. Complete Schedule T. |
| | Candidate/Officeholder/Political Committee | Check if Austin, TX, officeholder living expense membership dues |
| | | membership dues |
| Complete ONLY if direct | Candidate/Officeholder name Office sou | ught Office held |
| expenditure to benefit C | | agrit Office field |
| Dette | | |
| Date 06/27/2025 | Payee name Whole Foods | |
| | | |
| Amount (\$) | Payee address; City; State; Zip Co | ode |
| \$59.9 | 9 701 Waugh | |
| | | |
| | Houston, TX 77019 | |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| EXPENDITURE | Food/Beverage Expense | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | cake for intern |
| | | |
| Complete ONLY if direct | Candidate/Officeholder name Office sou | ught Office held |
| expenditure to benefit C | | <u> </u> |
| | | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

| | Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica | , ₋ I Co | mmittee | Fees Food/Beverage Expense Gift/Awards/Memorials Exper Legal Services | nse | Polling Expe Printing Exp | lead/Rental Expense Inse ense ges/Contract Labor | | Travel in District Travel Out of Di | |
|---|---|------------------------|---------------|---|--------------|------------------------------|---|---|-------------------------------------|----------------------------|
| | Credit Card Payment | | | The Instruction Guide | explains l | how to com | plete this form. | | | |
| 1 | Total pages Schedule F1: Sch: 42/42 Rpt: | 2 | | E u A. (The Honorable) | ١ | | | 3 | Filer ID 00081751 | (Ethics Commission Filers) |
| Ļ | | L | | | , | | | | 00001731 | |
| ı | Date | 5 | Payee name | 2 | | | | | | |
| | 06/15/2025 | | X | | | | | | | |
| 6 | Amount (\$) | 7 | Payee addre | ess; City; | State; | Zip Cod | е | | | |
| | \$90.72 | | 1355 Marke | et Street | | | | | | |
| | | | Ste. 900 | | | | | | | |
| | | | San Franci | sco, CA 94103 | | | | | | |
| 8 | PURPOSE | (a) | Category (S | See Categories listed at the top | of this sche | edule) (I | b) Description | | | |
| | OF EXPENDITURE | | Advertising | | | ŕ | | | | nplete Schedule T. |
| | EXPENDITORE | | | | | | _ | | (, officeholder livin | g expense |
| | | | | | | | X verification | n | | |
| | | | | | | | | | | |
| | Complete ONLY if direct expenditure to benefit C/OI | | Candidate/Off | ficeholder name | C | Office sough | nt | | Office h | eld |
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