

**JUDICIAL CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

**FORM JC/OH  
COVER SHEET PG 1**

The JC/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers) 00086046	2 Total pages filed: 72		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Katherine N.	MI	<b>OFFICE USE ONLY</b>		
	NICKNAME Kat	LAST Thomas	SUFFIX	Date Received ELECTRONICALLY FILED 01/15/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE			Date Hand-delivered or Date Postmarked		
	<b>REDACTED PER 254.0313, GOV'T CODE</b>			Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Athena M.	MI			
	NICKNAME	LAST Thomas	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE
	<b>REDACTED PER 254.0313, GOV'T CODE</b>					
7 CAMPAIGN TREASURER PHONE	AREA CODE (713)	PHONE NUMBER 703-6053	EXTENSION			
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded modified reporting limit	<input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
10 ELECTION	ELECTION DATE Month 03/03/2026		Day	ELECTION TYPE		
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	<input type="checkbox"/> General	<input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) District Judge District 184 Harris			12 OFFICE SOUGHT (if known) District Judge District 184		

**GO TO PAGE 2**

**JUDICIAL CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM JC/OH  
COVER SHEET PG 2**

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13 C / OH NAME	Thomas, Katherine N. (The Honorable)		14 Filer ID (Ethics Commission Filers) 00086046												
15 NOTICE FROM POLITICAL COMMITTEE(S)	<p>This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.</p> <table border="1"> <tr> <td><input type="checkbox"/> Additional Pages</td> <td>COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td></td> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td></td> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>			<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS		<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			COMMITTEE CAMPAIGN TREASURER ADDRESS
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME													
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS													
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME													
		COMMITTEE CAMPAIGN TREASURER ADDRESS													
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00												
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 64,061.62												
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00												
	4. <b>TOTAL POLITICAL EXPENDITURES</b>		\$ 11,492.41												
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 150,568.72												
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00												
17 AFFIDAVIT															
<p>I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.</p> <p>The Honorable Katherine N. Thomas</p> <hr/> <p>Signature of Candidate or Officeholder</p>															
AFFIX NOTARY STAMP / SEAL ABOVE															
Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.															
Signature of officer administering oath		Printed name of officer administering oath													
		Title of officer administering oath													

**SUBTOTALS - JC/OH****FORM JC/OH  
COVER SHEET PG 3**

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<b>18</b> FILER NAME Thomas, Katherine N. (The Honorable)	<b>19</b> Filer ID (Ethics Commission Filers) 00086046
<b>20</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A(J): MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) \$ 54,123.00	
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 9,938.62	
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) \$	
4. <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL) \$	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 11,492.41	
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$	
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$	
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$	
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$	
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 1/54 Rpt: 4/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 07/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Timothy  <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77084	<b>7</b> Amount of Contribution (\$) \$500.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm The Law Office of Timothy Adams, PLLC.		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/14/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Age, Jesslyn (Dr.)  Contributor address; City; State; Zip Code  Fulshear, TX 77441		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Consultant		Contributor's Job Title Consultant
Contributor's employer/law firm InnovAge360		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/01/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Chabli (Mrs.)  Contributor address; City; State; Zip Code  Houston, TX 77007		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Officer of C.S. Alexander, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 2/54 Rpt: 5/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Davincia (Mrs.) <b>6</b> Contributor address; City; State; Zip Code  Iowa Colony, TX 77583	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Contributor's Principal Occupation Planner		<b>9</b> Contributor's Job Title Planner
<b>10</b> Contributor's employer/law firm Mammoet		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 08/30/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Rickie Contributor address; City; State; Zip Code  Magnolia, TX 77355		Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Entertainment Attorney		Contributor's Job Title Entertainment Attorney
Contributor's employer/law firm Attorney Ricky Anderson PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/24/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Asuquo, Anita Contributor address; City; State; Zip Code  Houston, TX 77008		Amount of Contribution (\$)  \$100.00
Contributor's Principal Occupation Project Manager		Contributor's Job Title Project Manager
Contributor's employer/law firm Indeed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 3/54 Rpt: 6/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 07/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bacy , Akilah	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77243	
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Bacy Law, PLLC.		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, DeShun (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Iowa Colony , TX 77583	
Contributor's Principal Occupation Business Owner		Contributor's Job Title Business Owner
Contributor's employer/law firm Deluxe Window Treatments		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beatty , Krystal (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Houston, TX 77045	
Contributor's Principal Occupation Pharmaceutical Sales		Contributor's Job Title Pharmaceutical Sales
Contributor's employer/law firm lovance		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 4/54 Rpt: 7/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 07/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bond, Veronica (Mrs.)	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Philadelphia , PA 19125	
<b>8</b> Contributor's Principal Occupation Strategic Program Manager		<b>9</b> Contributor's Job Title Johnson & Johnson
<b>10</b> Contributor's employer/law firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 08/12/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bond, Veronica (Mrs.)
		Contributor address; City; State; Zip Code  Philadelphia , PA 19125
Contributor's Principal Occupation Strategic Program Manager		Contributor's Job Title Strategic Program Manager
Contributor's employer/law firm Johnson & Johnson		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/12/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bond, Veronica (Mrs.)
		Contributor address; City; State; Zip Code  Philadelphia , PA 19125
Contributor's Principal Occupation Strategic Program Manager		Contributor's Job Title Strategic Program Manager
Contributor's employer/law firm Johnson & Johnson		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 5/54 Rpt: 8/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bond, Veronica (Mrs.)	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Philadelphia , PA 19125	
<b>8</b> Contributor's Principal Occupation Strategic Program Manager		<b>9</b> Contributor's Job Title Strategic Program Manager
<b>10</b> Contributor's employer/law firm Johnson & Johnson		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 11/12/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bond, Veronica (Mrs.)
		Contributor address; City; State; Zip Code  Philadelphia , PA 19125
Contributor's Principal Occupation Strategic Program Manager		Contributor's Job Title Strategic Program Manager
Contributor's employer/law firm Johnson & Johnson		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/12/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bond, Veronica (Mrs.)
		Contributor address; City; State; Zip Code  Philadelphia , PA 19125
Contributor's Principal Occupation Strategic Program Manager		Contributor's Job Title Strategic Program Manager
Contributor's employer/law firm Johnson & Johnson		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 6/54 Rpt: 9/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/27/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brickhouse, Jamal (Mr.)	<b>7</b> Amount of Contribution (\$) \$150.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002	
<b>8</b> Contributor's Principal Occupation Engineer		<b>9</b> Contributor's Job Title Engineer
<b>10</b> Contributor's employer/law firm LTD Hospitality		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Luvenia (Mrs.)	Amount of Contribution (\$) \$184.00
	Contributor address; City; State; Zip Code  Sugar Land , TX 77479	
Contributor's Principal Occupation Director		Contributor's Job Title Director
Contributor's employer/law firm United Airlines		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruder, Jasmine (Ms.)	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code  Houston, TX 77025	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 7/54 Rpt: 10/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 08/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Rebecca (Dr.) <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77062	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Contributor's Principal Occupation Physician		<b>9</b> Contributor's Job Title Physician
<b>10</b> Contributor's employer/law firm Village Medical		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Rebecca (Dr.) Contributor address; City; State; Zip Code  Houston, TX 77062		Amount of Contribution (\$)  \$50.00
Contributor's Principal Occupation Physician		Contributor's Job Title Physician
Contributor's employer/law firm Village Medical		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Rebecca (Dr.) Contributor address; City; State; Zip Code  Houston, TX 77062		Amount of Contribution (\$)  \$50.00
Contributor's Principal Occupation Physician		Contributor's Job Title Physician
Contributor's employer/law firm Village Medical		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 8/54 Rpt: 11/72	
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046	
<b>4</b> Date 07/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cadore Esq., Judith Martin (Ms.)	<b>7</b> Amount of Contribution (\$) \$100.00	
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77004		
<b>8</b> Contributor's Principal Occupation 77004		<b>9</b> Contributor's Job Title Attorney	
<b>10</b> Contributor's employer/law firm Attorney		<b>11</b> Law firm of contributor's spouse (if any)	
<b>12</b> If contributor is a child, law firm of parent(s) (if any)			
Date 10/30/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calloway , Charlotte Contributor address; City; State; Zip Code  Houston, TX 77054	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Unemployed		Contributor's Job Title Unemployed	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 07/24/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canto, Christopher (Mr.) Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation		Contributor's Job Title	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 9/54 Rpt: 12/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Daphane (Mrs.)	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Missouri City , TX 77459	
<b>8</b> Contributor's Principal Occupation Executive Director		<b>9</b> Contributor's Job Title Executive Director
<b>10</b> Contributor's employer/law firm Genesys Works Houston		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark-Cunningham, Nicole (Mrs.)	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code  Pearland, TX 77584	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Clark-Cunningham Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Terence (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Houston, TX 77004	
Contributor's Principal Occupation Business Owner		Contributor's Job Title Business Owner
Contributor's employer/law firm Owner - Home Automation/Low Voltage Company		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 10/54 Rpt: 13/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornelius, Christina (Ms.)	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77040	
<b>8</b> Contributor's Principal Occupation Business Development Principal Manager		<b>9</b> Contributor's Job Title Business Development Principal Manager
<b>10</b> Contributor's employer/law firm Houston-Galveston Area Council		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 11/29/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornelius, Christina (Ms.)		Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Houston, TX 77040		
Contributor's Principal Occupation Business Development Principal Manager		Contributor's Job Title Business Development Principal Manager
Contributor's employer/law firm Houston-Galveston Area Council		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Bryant (Mr.)		Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code  Katy, TX 77494		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Daniels Law Group		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 11/54 Rpt: 14/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Keasia (Mrs.)	<b>7</b> Amount of Contribution (\$) \$150.00
	<b>6</b> Contributor address; City; State; Zip Code  Richmond, TX 77406	
<b>8</b> Contributor's Principal Occupation Senior Project Management Executive		<b>9</b> Contributor's Job Title Senior Project Management Executive
<b>10</b> Contributor's employer/law firm Vantage Point Business Solutions		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Cedric (Mr.)
		Contributor address; City; State; Zip Code  Houston , TX 77002
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Law Offices of Cedric Davis		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/07/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Neal (Mr.)
		Contributor address; City; State; Zip Code  Bellaire, TX 77401
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Neal Davis Law Firm, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 12/54 Rpt: 15/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeBruyn, Joseph (Mr.)	<b>7</b> Amount of Contribution (\$) \$200.00
	<b>6</b> Contributor address; City; State; Zip Code  Meadows Place, TX 77477	
<b>8</b> Contributor's Principal Occupation Court Coordinator		<b>9</b> Contributor's Job Title Court Coordinator
<b>10</b> Contributor's employer/law firm District Court Administration		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/05/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeRouen , Brenda (Ms.) Contributor address; City; State; Zip Code  Pearland , TX 77584		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Derouren Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/21/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dixon, Miles Contributor address; City; State; Zip Code  Missouri City , TX 77459		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Business Development		Contributor's Job Title Technical Sales/Cryogenic Consultant
Contributor's employer/law firm Messer Americas		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 13/54 Rpt: 16/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 08/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dixon, Miles <b>6</b> Contributor address; City; State; Zip Code  Missouri City , TX 77459	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Contributor's Principal Occupation Business Development		<b>9</b> Contributor's Job Title Business Development
<b>10</b> Contributor's employer/law firm Curtis Steel		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 09/21/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dixon, Miles Contributor address; City; State; Zip Code  Missouri City , TX 77459		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Business Development		Contributor's Job Title Business Development
Contributor's employer/law firm Curtis Steel		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Anthony Contributor address; City; State; Zip Code  Houston, TX 77051		Amount of Contribution (\$) \$525.00
Contributor's Principal Occupation Analyst		Contributor's Job Title Analyst
Contributor's employer/law firm Houston Methodist Hospital		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 14/54 Rpt: 17/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 12/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Egans, Tina and Terry (Ms.)	<b>7</b> Amount of Contribution (\$) \$1,000.00
	<b>6</b> Contributor address; City; State; Zip Code  Spring , TX 77379	
<b>8</b> Contributor's Principal Occupation Social Work		<b>9</b> Contributor's Job Title Social Work
<b>10</b> Contributor's employer/law firm Texas Tranquility Estates		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/23/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis , Kourtnie (Ms.)		Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Sugar Land, TX 77478		
Contributor's Principal Occupation Business Owner		Contributor's Job Title Graphic Designer
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/23/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enaohwo, Bijul (Ms.)		Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Sugar Land, TX 77496		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Harris Center		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 15/54 Rpt: 18/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esther, Marcus (Mr.) <b>6</b> Contributor address; City; State; Zip Code  Texas City , TX 77591	<b>7</b> Amount of Contribution (\$) \$1,500.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm The Law Office of Marcus Esther, PLLC		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 08/30/2025 <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Dr. Gina <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77021		<b>7</b> Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Physician		Contributor's Job Title Physician
Contributor's employer/law firm Clear Lake Specialties		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/01/2025 <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fenceroy, Celia (Ms.) <b>6</b> Contributor address; City; State; Zip Code  Pearland , TX 77584		<b>7</b> Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Clinical Pharmacist		Contributor's Job Title Clinical Pharmacist
Contributor's employer/law firm Harris Health System		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 16/54 Rpt: 19/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Jaeci (Mrs.)	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77047	
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Centene		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/03/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher Esq., Lindsay (Mrs.)
		Contributor address; City; State; Zip Code  Houston , TX 77004
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Baker Botts LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/25/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fordjour, Richard
		Contributor address; City; State; Zip Code  Washington , DC 20010
Contributor's Principal Occupation Dentist		Contributor's Job Title Dentist
Contributor's employer/law firm Washington Center for Dentistry		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 17/54 Rpt: 20/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Angela (Ms.) <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77225	<b>7</b> Amount of Contribution (\$) \$50.00
<b>8</b> Contributor's Principal Occupation Project Manager		<b>9</b> Contributor's Job Title Project Manager
<b>10</b> Contributor's employer/law firm Harris Health		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/26/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gant, Craig (Mr.) Contributor address; City; State; Zip Code  Richmond, TX 77407		Amount of Contribution (\$) \$150.00
Contributor's Principal Occupation Business Owner		Contributor's Job Title Business Owner
Contributor's employer/law firm CSG Catalyst Consulting Group		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/24/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Alexander (Mr.) Contributor address; City; State; Zip Code  Houston, TX 77020		Amount of Contribution (\$) \$50.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 18/54 Rpt: 21/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 08/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Samuel (Mr.)	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77006	
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Samuel M. Garnder, Attorney at Law		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 12/03/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gipson , Alissa (Mrs.) Contributor address; City; State; Zip Code  Houston , TX 77018		Amount of Contribution (\$) \$184.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Chamberlain Hrdlicka		Law firm of contributor's spouse (if any) Clifford Chance Associates, LLP
If contributor is a child, law firm of parent(s) (if any)		
Date 09/30/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Casey (Mrs.) Contributor address; City; State; Zip Code  Houston, TX 77008		Amount of Contribution (\$) \$1,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Casey Gonzalez Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 19/54 Rpt: 22/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodine, Neice (Ms.)	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77047	
<b>8</b> Contributor's Principal Occupation Talent Consultant		<b>9</b> Contributor's Job Title Talent Consultant
<b>10</b> Contributor's employer/law firm Price Waterhouse Coopers		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/11/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray , Karen (Dr.)  Contributor address; City; State; Zip Code  Houston, TX 77021		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Physician-Medical Director		Contributor's Job Title Physician-Medical Director
Contributor's employer/law firm Centene Corporation		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/23/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hagerman Esq., Charles (Mr.)  Contributor address; City; State; Zip Code  Houston , TX 77007		Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Harris County District Attorney's Office		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 20/54 Rpt: 23/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Taylor (Ms.) <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77071	<b>7</b> Amount of Contribution (\$) \$50.00
<b>8</b> Contributor's Principal Occupation RIN and BioFuels Operator		<b>9</b> Contributor's Job Title RIN and BioFuels Operator
<b>10</b> Contributor's employer/law firm Aramco		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/15/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins, Veronica (Ms.) Contributor address; City; State; Zip Code  Houston, TX 77056		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Dentist		Contributor's Job Title Dentist
Contributor's employer/law firm Brident Dental & Orthodontics		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/20/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbard, Stephen (Mr.) Contributor address; City; State; Zip Code  Tyler, TX 75702		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Hubbard Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 21/54 Rpt: 24/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/27/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudnall, Gina (Dr.)	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Humble, TX 77396	
<b>8</b> Contributor's Principal Occupation Psychologist		<b>9</b> Contributor's Job Title Psychologist
<b>10</b> Contributor's employer/law firm Total Wellness Assessment and Counseling Center		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Jared (Mr.)
		Contributor address; City; State; Zip Code  Dunwoody , GA 30338
Contributor's Principal Occupation Transportation		Contributor's Job Title Transportation
Contributor's employer/law firm WES Logistics LLC		Law firm of contributor's spouse (if any) WES Logistics LLC
If contributor is a child, law firm of parent(s) (if any)		
Date 12/11/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurd, Keito
		Contributor address; City; State; Zip Code  Rosharon, TX 77583
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Hurd Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 22/54 Rpt: 25/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 09/25/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchinson , Deborah	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77004	
<b>8</b> Contributor's Principal Occupation Business Owner		<b>9</b> Contributor's Job Title Business Owner
<b>10</b> Contributor's employer/law firm C&L Consulting		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irvin, Cheryl (Ms.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77002	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Irvin Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irvin, Cheryl (Ms.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77002	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Irvin Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 23/54 Rpt: 26/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Kameshe <b>6</b> Contributor address; City; State; Zip Code  Rosenberg , TX 77469	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Contributor's Principal Occupation Senior Compliance Education & HR Liaison		<b>9</b> Contributor's Job Title Senior Compliance Education & HR Liaison
<b>10</b> Contributor's employer/law firm Ensign Services		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/29/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Kameshe  Contributor address; City; State; Zip Code  Rosenberg , TX 77469		Amount of Contribution (\$)  \$150.00
Contributor's Principal Occupation Senior Compliance Education & HR Liaison		Contributor's Job Title Senior Compliance Education & HR Liaison
Contributor's employer/law firm Ensign		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/14/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Meaghan  Contributor address; City; State; Zip Code  Houston, TX 77007		Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 24/54 Rpt: 27/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson , Ocoszio (Mr.) <b>6</b> Contributor address; City; State; Zip Code  Atlanta, GA 30319	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm US Department of Housing and Urban Development		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/23/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson Esq., Jalen (Mr.) Contributor address; City; State; Zip Code  Houston, TX 77018		Amount of Contribution (\$)  \$250.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Jackson Walker LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/24/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Myrtle (Ms.) Contributor address; City; State; Zip Code  Houston , TX 77056		Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 25/54 Rpt: 28/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Nettie (Mrs.)	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77045	
<b>8</b> Contributor's Principal Occupation Licensed Psychotherapist		<b>9</b> Contributor's Job Title Psychotherapist
<b>10</b> Contributor's employer/law firm Nettie Jones, M.S., L.P.C.		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/23/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelusky , Amber (Mrs.)
		Contributor address; City; State; Zip Code  Houston, TX 77027
Contributor's Principal Occupation Event Coordinator		Contributor's Job Title Event Coordinator
Contributor's employer/law firm Big Brothers Big Sisters of Greater Houston		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/02/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerney Esq., Felicia (Ms.)
		Contributor address; City; State; Zip Code  Houston , TX 77054
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 26/54 Rpt: 29/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/02/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Knight - Robinson , Angela (Ms.)	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Katy, TX 77494	
<b>8</b> Contributor's Principal Occupation Human Resource Sr. Leader		<b>9</b> Contributor's Job Title Human Resource Sr. Leader
<b>10</b> Contributor's employer/law firm Chevron		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 08/30/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Knowles, Lonnie Contributor address; City; State; Zip Code  Houston, TX 77002		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Lonnie R. Knowles & Assoc.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/28/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Krugh, Neil Contributor address; City; State; Zip Code  Houston, TX 77008		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Neil A. Krugh, PLLC.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 27/54 Rpt: 30/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 07/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaJeune , Schneider <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77021	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Contributor's Principal Occupation Business Owner		<b>9</b> Contributor's Job Title Business Owner
<b>10</b> Contributor's employer/law firm Snype Fitness		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/23/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster , Ashley (Ms.) Contributor address; City; State; Zip Code  Iowa Colony , TX 77584		Amount of Contribution (\$)  \$50.00
Contributor's Principal Occupation Business Owner		Contributor's Job Title Business Owner
Contributor's employer/law firm Chase'N'Dreams		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/23/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landy, Ashley (Mrs.) Contributor address; City; State; Zip Code  Houston, TX 77581		Amount of Contribution (\$)  \$15.00
Contributor's Principal Occupation Marketing Coordinator		Contributor's Job Title Marketing Coordinator
Contributor's employer/law firm Carollo Engineers		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 28/54 Rpt: 31/72	
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046	
<b>4</b> Date 08/07/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langham, Chanler (Mr.)	<b>7</b> Amount of Contribution (\$) \$1,500.00	
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77018		
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney	
<b>10</b> Contributor's employer/law firm Susman Godfrey		<b>11</b> Law firm of contributor's spouse (if any)	
<b>12</b> If contributor is a child, law firm of parent(s) (if any)			
Date 10/28/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lazard, Pamela (Ms.) Contributor address; City; State; Zip Code  Missouri City , TX 77489	Amount of Contribution (\$) \$150.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 12/05/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lazenby , Allen & Denise (Mr.) Contributor address; City; State; Zip Code  Houston , TX 77079	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired	
Contributor's employer/law firm		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 29/54 Rpt: 32/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lea, Lauren (Mrs.) <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77092	<b>7</b> Amount of Contribution (\$) \$250.00
<b>8</b> Contributor's Principal Occupation Marketing Professional		<b>9</b> Contributor's Job Title Marketing Professional
<b>10</b> Contributor's employer/law firm ExxonMobil		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/14/2025 <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Vernessa (Ms.) <b>6</b> Contributor address; City; State; Zip Code  Manvel , TX 77578		<b>7</b> Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Territory Manager		Contributor's Job Title Territory Manager
Contributor's employer/law firm Radius Health		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/23/2025 <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcel, Jailyn (Ms.) <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77004		<b>7</b> Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Publicist		Contributor's Job Title Publicist
Contributor's employer/law firm The Franky Collective		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 30/54 Rpt: 33/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcel, Jailyn (Ms.) <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77004	<b>7</b> Amount of Contribution (\$) \$500.00
<b>8</b> Contributor's Principal Occupation Publicist		<b>9</b> Contributor's Job Title Publicist
<b>10</b> Contributor's employer/law firm The Franky Collective		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/27/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Sherise (Mrs.) Contributor address; City; State; Zip Code  Houston, TX 77031		Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Accounting and Audit Professional		Contributor's Job Title Shell
Contributor's employer/law firm Shell		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/23/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin , Stephanie Contributor address; City; State; Zip Code  Houston, TX 77027		Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Stephanie Martin, Attorney at Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 31/54 Rpt: 34/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 08/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin Cadore, Judith <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77004	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Contributor's Principal Occupation Unemployed		<b>9</b> Contributor's Job Title Unemployed
<b>10</b> Contributor's employer/law firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 09/21/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin Cadore, Judith Contributor address; City; State; Zip Code  Houston, TX 77004		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Unemployed		Contributor's Job Title Unemployed
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/21/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin Cadore, Judith Contributor address; City; State; Zip Code  Houston, TX 77004		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Unemployed		Contributor's Job Title Unemployed
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 32/54 Rpt: 35/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 11/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin Cadore, Judith <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77004	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Contributor's Principal Occupation Unemployed		<b>9</b> Contributor's Job Title Unemployed
<b>10</b> Contributor's employer/law firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 08/06/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin McDowell, Brooke Contributor address; City; State; Zip Code  San Francisco, CA 94107		Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm AWS		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/23/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinnney , Chantel (Ms.) Contributor address; City; State; Zip Code  Houston, TX 77089		Amount of Contribution (\$) \$50.00
Contributor's Principal Occupation Community Engagement Director		Contributor's Job Title Community Engagement Director
Contributor's employer/law firm The Office of Commissioner Precinct 1		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 33/54 Rpt: 36/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McZeal Walters, Nicole (Dr.)	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Sugar Land, TX 77498	
<b>8</b> Contributor's Principal Occupation University Dean		<b>9</b> Contributor's Job Title University Dean
<b>10</b> Contributor's employer/law firm St. Thomas University		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miles, Cydonii (Mrs.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Houston, TX 77021	
Contributor's Principal Occupation Executive		Contributor's Job Title Executive
Contributor's employer/law firm METRO		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Taylor (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Houston, TX 77079	
Contributor's Principal Occupation Senior Vice President		Contributor's Job Title Senior Vice President
Contributor's employer/law firm Amegy Bank		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 34/54 Rpt: 37/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 07/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mims, Chelbi (Mrs.)	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77004	
<b>8</b> Contributor's Principal Occupation Government Affairs		<b>9</b> Contributor's Job Title Government Affairs
<b>10</b> Contributor's employer/law firm Texas Public Charter Schools Association		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/23/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Jakeveya (Ms.)
		Contributor address; City; State; Zip Code  Houston, TX 77077
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/24/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mixon, Kris
		Contributor address; City; State; Zip Code  Sugar Land, TX 77478
Contributor's Principal Occupation Senior Consultant		Contributor's Job Title Senior Consultant
Contributor's employer/law firm Deloitte		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 35/54 Rpt: 38/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moh, Kim (Mr.) <b>6</b> Contributor address; City; State; Zip Code  Katy , TX 77494	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Contributor's Principal Occupation Business Owner		<b>9</b> Contributor's Job Title Business Owner
<b>10</b> Contributor's employer/law firm Moh StyLz		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/19/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moncriffe, Tyrone (Mr.) Contributor address; City; State; Zip Code  Houston, TX 77002		Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Tyrone Moncriffe & Associates		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moseley , Erin (Ms.) Contributor address; City; State; Zip Code  Missouri City, TX 77489		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Consultant		Contributor's Job Title Consultant
Contributor's employer/law firm Dell Technologies		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 36/54 Rpt: 39/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Doug (Mr.)	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston , TX 77008	
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Murphy & McKinney Law Firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nielson, Hans (Mr.)	Amount of Contribution (\$) \$750.00
	Contributor address; City; State; Zip Code  Houston, TX 77095	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Nielson Law Firm, P.C.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Northern , Paula (Ms.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Cypress, TX 77433	
Contributor's Principal Occupation Executive		Contributor's Job Title Executive
Contributor's employer/law firm Microsoft		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 37/54 Rpt: 40/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 07/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oginni, George <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77098	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Leo & Oginni Personal Injury Lawyers, PLLC.		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/24/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Okunnu, Bolaji (Mr.)  Contributor address; City; State; Zip Code  Houston, TX 77083		Amount of Contribution (\$)  \$250.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Okunnu Law Group		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/09/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Overstreet, Brian (Mr.)  Contributor address; City; State; Zip Code  Houston, TX 77045		Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Overstreet Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 38/54 Rpt: 41/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 09/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearce, Richard <b>6</b> Contributor address; City; State; Zip Code  TX 77006	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Contributor's Principal Occupation Retired		<b>9</b> Contributor's Job Title Retired
<b>10</b> Contributor's employer/law firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/26/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennington, Lynn Contributor address; City; State; Zip Code  Sugar Land , TX 77498		Amount of Contribution (\$)  \$200.00
Contributor's Principal Occupation Retired Teacher		Contributor's Job Title Retired Teacher
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Stacy Contributor address; City; State; Zip Code  Fresno , TX 77545		Amount of Contribution (\$)  \$100.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 39/54 Rpt: 42/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Posey, Shanesie <b>6</b> Contributor address; City; State; Zip Code  Richmond, TX 77469	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Contributor's Principal Occupation Insurance Broker		<b>9</b> Contributor's Job Title Insurance Broker
<b>10</b> Contributor's employer/law firm USI Insurance Brokerage		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/24/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pressley, Jenean Contributor address; City; State; Zip Code  Pearland, TX 77584		Amount of Contribution (\$)  \$100.00
Contributor's Principal Occupation Senior Robotics Specialist		Contributor's Job Title Senior Robotics Specialist
Contributor's employer/law firm Medtronic		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/14/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray , Maverick (Mr.) Contributor address; City; State; Zip Code  Houston, TX 77018		Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Maverick Ray Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 40/54 Rpt: 43/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeder, Tiffany (Ms.)	<b>7</b> Amount of Contribution (\$) \$150.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77084	
<b>8</b> Contributor's Principal Occupation Learning & Development Specialist		<b>9</b> Contributor's Job Title Learning & Development Specialist
<b>10</b> Contributor's employer/law firm Venture Global LNG		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/23/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson , Devan (Mr.)		Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Lewis Brisbois		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/24/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Edwin (Ms.)		Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Houston, TX 77019		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 41/54 Rpt: 44/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 08/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbins, Gayla <b>6</b> Contributor address; City; State; Zip Code  Houston , TX 77004	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Contributor's Principal Occupation Consultant		<b>9</b> Contributor's Job Title Consultant
<b>10</b> Contributor's employer/law firm Unemployed		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberson , Brigid (Mr.)  Contributor address; City; State; Zip Code  Richmond , TX 77407		Amount of Contribution (\$)  \$150.00
Contributor's Principal Occupation Regional Security Director		Contributor's Job Title Regional Security Director
Contributor's employer/law firm Memorial Hermann Health System		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/20/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Brian (Mr.)  Contributor address; City; State; Zip Code  Humble, TX 77338		Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Roberts Criminal Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<p><b>The Instruction Guide explains how to complete this form.</b></p>		<p><b>1</b> Total pages Schedule A(J)1: Sch: 42/54 Rpt: 45/72</p>	
<p><b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)</p>		<p><b>3</b> Filer ID (Ethics Commission Filers) 00086046</p>	
<p><b>4</b> Date 07/24/2025</p>	<p><b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Jolante ..... <b>6</b> Contributor address; City; State; Zip Code  Houston , TX 77031</p>	<p><b>7</b> Amount of Contribution (\$) \$100.00</p>	
<p><b>8</b> Contributor's Principal Occupation Assistant Community Director</p>		<p><b>9</b> Contributor's Job Title Assistant Community Director</p>	
<p><b>10</b> Contributor's employer/law firm Blue Stone Premier</p>		<p><b>11</b> Law firm of contributor's spouse (if any) Blue Stone Premier</p>	
<p><b>12</b> If contributor is a child, law firm of parent(s) (if any)</p>			
<p>Date 10/29/2025</p>		<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Cortney (Mrs.) ..... Contributor address; City; State; Zip Code  Houston, TX 77021</p>	<p>Amount of Contribution (\$) \$150.00</p>
<p>Contributor's Principal Occupation Program Specialist</p>		<p>Contributor's Job Title Program Specialist</p>	
<p>Contributor's employer/law firm Harvard Business School</p>		<p>Law firm of contributor's spouse (if any)</p>	
<p>If contributor is a child, law firm of parent(s) (if any)</p>			
<p>Date 07/24/2025</p>		<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Elayne (Ms.) ..... Contributor address; City; State; Zip Code  Houston, TX 77004</p>	<p>Amount of Contribution (\$) \$100.00</p>
<p>Contributor's Principal Occupation Attorney</p>		<p>Contributor's Job Title Attorney</p>	
<p>Contributor's employer/law firm Assistant County Attorney</p>		<p>Law firm of contributor's spouse (if any)</p>	
<p>If contributor is a child, law firm of parent(s) (if any)</p>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 43/54 Rpt: 46/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 07/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Lilly (Ms.) <b>6</b> Contributor address; City; State; Zip Code  Katy , TX 77494	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Lewis Brisbois		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/23/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Lilly (Ms.) Contributor address; City; State; Zip Code  Katy , TX 77494		Amount of Contribution (\$) \$50.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Lewis Brisbois		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Runcie, Bradley (Mr.) Contributor address; City; State; Zip Code  Houston, TX 77014		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Theissan Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 44/54 Rpt: 47/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rushing, Cathy <b>6</b> Contributor address; City; State; Zip Code  Fresno , TX 77545	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Contributor's Principal Occupation Learning and Development Professional		<b>9</b> Contributor's Job Title Learning and Development Professional
<b>10</b> Contributor's employer/law firm University of Houston-Downtown		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/08/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Leonard (Mr.) Contributor address; City; State; Zip Code  Houston, TX 77082		Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm LS Fenix Consulting		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/24/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sealy, Sean Contributor address; City; State; Zip Code  Houston, TX 77002		Amount of Contribution (\$)  \$100.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Law Office of Sean Bostic Sealy		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 45/54 Rpt: 48/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Bryson (Mr.)	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77084	
<b>8</b> Contributor's Principal Occupation Financial Strategist		<b>9</b> Contributor's Job Title Financial Strategist
<b>10</b> Contributor's employer/law firm The Fitzpatrick Group		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Ashley (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Houston, TX 77027	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith , Kara	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  Houston , TX 77021	
Contributor's Principal Occupation Event Director		Contributor's Job Title Event Director
Contributor's employer/law firm Bright Event Rentals Houston		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 46/54 Rpt: 49/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith , LaToya (Ms.) <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77053	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Contributor's Principal Occupation Executive Consulting		<b>9</b> Contributor's Job Title Executive Consultant
<b>10</b> Contributor's employer/law firm Bridge Philanthropic Consulting		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 12/06/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stubblefield, Raymond Contributor address; City; State; Zip Code  Houston, TX 77009		Amount of Contribution (\$)  \$50.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/30/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swindle, Earl Contributor address; City; State; Zip Code  Houston, TX 77069		Amount of Contribution (\$)  \$500.00
Contributor's Principal Occupation Therapist		Contributor's Job Title Therapist
Contributor's employer/law firm Institute for Chemical Dependent Studies		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 47/54 Rpt: 50/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Sparks Law Firm PC <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77004	<b>7</b> Amount of Contribution (\$) \$1,500.00
<b>8</b> Contributor's Principal Occupation		<b>9</b> Contributor's Job Title
<b>10</b> Contributor's employer/law firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/24/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Marcus Contributor address; City; State; Zip Code  Selma, TX 78154		Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Pastor		Contributor's Job Title Pastor
Contributor's employer/law firm World Harvest Ministries		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/23/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson , Arabia (Mrs.) Contributor address; City; State; Zip Code  Houston, TX 77077		Amount of Contribution (\$) \$10.00
Contributor's Principal Occupation Business Owner		Contributor's Job Title Business Owner
Contributor's employer/law firm Art Group, LLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 48/54 Rpt: 51/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 07/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Brionne <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77042	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm The Law Office of Cherika Edwards, PLLC		<b>11</b> Law firm of contributor's spouse (if any) The Law Office of Cherika Edwards , PLLC
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/17/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thornton, Earyn Contributor address; City; State; Zip Code  Mount Laurel , NJ 08054		Amount of Contribution (\$)  \$100.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Organon		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/22/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thornton, Earyn Contributor address; City; State; Zip Code  Mount Laurel , NJ 08054		Amount of Contribution (\$)  \$100.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Organon		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 49/54 Rpt: 52/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 07/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Truley , Angela (Mrs.)	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77042	
<b>8</b> Contributor's Principal Occupation Real Estate Developer		<b>9</b> Contributor's Job Title Real Estate Developer
<b>10</b> Contributor's employer/law firm ReOwned Properties		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/23/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner , Yolanda (Mrs.)
		Contributor address; City; State; Zip Code  Missouri City , TX 77459
Contributor's Principal Occupation Sales		Contributor's Job Title Sales
Contributor's employer/law firm MD Anderson		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/14/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Upperman, Crystal (Mrs.)
		Contributor address; City; State; Zip Code  Clarksburg, MD 20024
Contributor's Principal Occupation Senior Manager		Contributor's Job Title Senior Manager
Contributor's employer/law firm Deloitte		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 50/54 Rpt: 53/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van , Tuyen (Mr.) <b>6</b> Contributor address; City; State; Zip Code  Missouri City, TX 77459	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Contributor's Principal Occupation Business Owner		<b>9</b> Contributor's Job Title Business Owner
<b>10</b> Contributor's employer/law firm Houston Badminton Center		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vick , Charles (Mr.) Contributor address; City; State; Zip Code  Cypress, TX 77429		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Mortgage Broker		Contributor's Job Title Mortgage Broker
Contributor's employer/law firm Connections Capital LLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/29/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, William (Mr.) Contributor address; City; State; Zip Code  Houston, TX 77047		Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Procurement Engineer		Contributor's Job Title Procurement Engineer
Contributor's employer/law firm TMEIC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 51/54 Rpt: 54/72	
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046	
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward , Jacqueline (Mrs.)	<b>7</b> Amount of Contribution (\$) \$150.00	
	<b>6</b> Contributor address; City; State; Zip Code  Missouri City , TX 77459		
<b>8</b> Contributor's Principal Occupation System Chief Nurse Executive & Sr Vice President		<b>9</b> Contributor's Job Title System Chief Nurse Executive & Sr Vice President	
<b>10</b> Contributor's employer/law firm Texas Children's Hospital		<b>11</b> Law firm of contributor's spouse (if any)	
<b>12</b> If contributor is a child, law firm of parent(s) (if any)			
Date 10/23/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washington , Arthur (Mr.) Contributor address; City; State; Zip Code  Houston , TX 77098	Amount of Contribution (\$) \$1,500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney	
Contributor's employer/law firm Arthur C. Washington, Attorney at Law		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 10/15/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washington , Nedra (Ms.) Contributor address; City; State; Zip Code  Pearland , TX 77584	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Sr. Human Resources Business Partner		Contributor's Job Title Sr. Human Resources Business Partner	
Contributor's employer/law firm ENGIE		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 52/54 Rpt: 55/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/27/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webber, Kethia (Mrs.)	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code  Missouri City, TX 77459	
<b>8</b> Contributor's Principal Occupation HR Professional		<b>9</b> Contributor's Job Title HR Professional
<b>10</b> Contributor's employer/law firm MD Anderson Cancer Center		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/10/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Nicle (Mrs.)		Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Pearland, TX 77584		
Contributor's Principal Occupation President		Contributor's Job Title President
Contributor's employer/law firm Westco Ventures		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/23/2025  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Tyler		Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Houston, TX 77002		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Tyler White, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 53/54 Rpt: 56/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 07/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Dandre (Mr.) .....  <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77009	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Contributor's Principal Occupation		<b>9</b> Contributor's Job Title
<b>10</b> Contributor's employer/law firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 07/23/2025 ..... Contributor address; City; State; Zip Code  Birmingham , AL 35214		Amount of Contribution (\$) \$50.00
Contributor's Principal Occupation Data Scientist		Contributor's Job Title Data Scientist
Contributor's employer/law firm Children's Hospital of Chicago		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/20/2025 ..... Contributor address; City; State; Zip Code  Bellaire, TX 77401		Amount of Contribution (\$) \$1,500.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A(J)1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 54/54 Rpt: 57/72
<b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086046
<b>4</b> Date 10/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zuniga, Baldemar (Mr.) ..... <b>6</b> Contributor address; City; State; Zip Code  Seabrook , TX 77586	<b>7</b> Amount of Contribution (\$) \$250.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Baldemar Law Office, P.C.		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

<p><b>The Instruction Guide explains how to complete this form.</b></p>				<p><b>1</b> Total pages Schedule A2: Sch: 1/2 Rpt: 58/72</p>
<p><b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)</p>				<p><b>3</b> Filer ID (Ethics Commission Filers) 00086046</p>
<p><b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p><b>5</b> Date 10/23/2025</p>	<p><b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keiter, Justin (Mr.)</p>			<p><b>8</b> Amount of contribution (\$) \$3,401.12</p> <p><b>9</b> In-kind contribution description Fundraising Dinner Expenses</p>
	<p><b>7</b> Contributor address; City; State; Zip Code  Houston, TX 77008</p>			
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>				
<p><b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p><b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p><b>12</b> Contributor's principal occupation (FOR JUDICIAL) Attorney</p>		<p><b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions) Attorney</p>		
<p><b>14</b> Contributor's employer/law firm (FOR JUDICIAL) The Keiter Law Firm, PLLC.</p>		<p><b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p><b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 10/23/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiernan, John Casey (Mr.)</p>			<p>Amount of contribution (\$) \$2,875.00</p> <p>In-kind contribution description Fundraising Dinner</p>
	<p>Contributor address; City; State; Zip Code  Houston, TX 77002</p>			
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>				
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL) Attorney</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions) Attorney</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL) Mercer &amp; Kiernan, Attorney at Law</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 10/29/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Angela (Mrs.)</p>			<p>Amount of contribution (\$) \$1,500.00</p> <p>In-kind contribution description</p>
	<p>Contributor address; City; State; Zip Code  Missouri City, TX 77459</p>			
<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>				
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL) Interior Designer</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions) Interior Designer</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL) Evolution by Design</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

<p><b>The Instruction Guide explains how to complete this form.</b></p>				<p><b>1</b> Total pages Schedule A2: Sch: 2/2 Rpt: 59/72</p>
<p><b>2</b> FILER NAME Thomas, Katherine N. (The Honorable)</p>				<p><b>3</b> Filer ID (Ethics Commission Filers) 00086046</p>
<p><b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p><b>5</b> Date 07/23/2025</p>	<p><b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Athena (Mrs.)  <b>7</b> Contributor address; City; State; Zip Code  Richmond, TX 77406</p>			<p><b>8</b> Amount of contribution (\$) \$1,162.50</p> <p><b>9</b> In-kind contribution description Food &amp; Beverage for Fundraiser</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p><b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p><b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p><b>12</b> Contributor's principal occupation (FOR JUDICIAL) Business Owner</p>		<p><b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions) Business Owner</p>		
<p><b>14</b> Contributor's employer/law firm (FOR JUDICIAL) Thomas &amp; Lewin Associates</p>		<p><b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p><b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 08/30/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walter J. Pink &amp; Associates  Contributor address; City; State; Zip Code  Houston, TX 77056</p>			<p>Amount of contribution (\$) \$1,000.00</p> <p>In-kind contribution description Food, Beverage and Decorations for Fundraiser</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/13 Rpt: 60/72	2 FILER NAME Thomas, Katherine N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086046
4 Date 07/24/2025	5 Payee name Awakened Visions Media, LLC	
6 Amount (\$) \$431.00	7 Payee address; City; State; Zip Code  Houston, TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/30/2025	Payee name Awakened Visions Media, LLC	
Amount (\$) \$396.88	Payee address; City; State; Zip Code  Houston, TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/17/2025	Payee name Awakened Visions Media, LLC	
Amount (\$) \$318.75	Payee address; City; State; Zip Code  TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser Event Photography
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/13 Rpt: 61/72	2 FILER NAME Thomas, Katherine N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086046
4 Date 11/26/2025	5 Payee name Awakened Visions Media, LLC	
6 Amount (\$) \$132.81	7 Payee address; City; State; Zip Code  TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/30/2025	Payee name Balloon Posh	
Amount (\$) \$465.48	Payee address; City; State; Zip Code  3703 Irvington Blvd  Houston, TX 77009	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Balloon Decor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/17/2025	Payee name Batam Babies Orphanage Bi-Annual Fundraiser	
Amount (\$) \$378.26	Payee address; City; State; Zip Code  TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation toward a fundraising event.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/13 Rpt: 62/72	2 FILER NAME Thomas, Katherine N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086046
4 Date 11/09/2025	5 Payee name Bethany Baptist Church	
6 Amount (\$) \$200.00	7 Payee address; City; 7304 Homestead Rd  Houston, TX 77028	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Thanksgiving Turkey Giveaway Donation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name  Brandon , Love (Sgt.)	Office sought  Office held
Date 09/10/2025	Payee name  Brandon , Love (Sgt.)	
Amount (\$) \$100.00	Payee address; City;  TX	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense African American Police Officer League Gala
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name  Chism Strategy Advocacy & Elections	Office sought  Office held
Date 10/20/2025	Payee name  Chism Strategy Advocacy & Elections	
Amount (\$) \$600.00	Payee address; City; 305 Green Oak Lane  Madison , MS 39110	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs, Walk Cards & Business Cards (Design, Printing and Shipping)
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name  www.ethics.state.tx.us	Office sought  Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/13 Rpt: 63/72	2 FILER NAME Thomas, Katherine N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086046
4 Date 10/17/2025	5 Payee name Cool Gray Graphic Design GFX	
6 Amount (\$) \$25.00	7 Payee address; City; 6307 Ridgeway Drive N/A Houston , TX 77087	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic Design
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/23/2025	Payee name Cool Gray Graphic Design GFX	
Amount (\$) \$75.00	Payee address; City; 6307 Ridgeway Drive N/A Houston , TX 77087	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic Design
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/12/2025	Payee name Costco	
Amount (\$) \$150.00	Payee address; City; State; Zip Code  TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toiletry Donation for Clothing Drive
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/13 Rpt: 64/72	2 FILER NAME Thomas, Katherine N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086046
4 Date 10/23/2025	5 Payee name FedEx Kinkos	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code  TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 10/23/2025	Payee name FedEx Kinkos	Office held
Amount (\$) \$189.00	Payee address; City; State; Zip Code  Houston, TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Materials for Fundraiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 11/26/2025	Payee name Harris County Democratic Party	Office held
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code  3302 Canal Street  Houston, TX 77020	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/13 Rpt: 65/72	2 FILER NAME Thomas, Katherine N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086046
4 Date 10/29/2025	5 Payee name Homegoods	
6 Amount (\$) \$84.35	7 Payee address; City; State; Zip Code 5540 Weslayan  Houston, TX 77005	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Event Decor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/08/2025	Payee name Houston Bar Association	
Amount (\$) \$390.00	Payee address; City; State; Zip Code 1000 Louisiana Street Suite 360 Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 76th Annual Harvest Gala
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/04/2025	Payee name Houston Black American Democrats PAC	
Amount (\$) \$100.00	Payee address; City; State; Zip Code  TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership Dues
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/13 Rpt: 66/72	2 FILER NAME Thomas, Katherine N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086046
4 Date 10/27/2025	5 Payee name Ink & Etch	
6 Amount (\$) \$484.96	7 Payee address; City; State; Zip Code 5201 Highway 6 Ste 575 Missouri City, TX 77459	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Acrylic QR Codes
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/20/2025	Payee name Jack & Jill of America, Houston Metropolitan Chapter	
Amount (\$) \$350.00	Payee address; City; State; Zip Code Houston, TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2025 Jingle & Joy Toy Giveaway
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/25/2025	Payee name Johnson , Antron (Mr.)	
Amount (\$) \$100.00	Payee address; City; State; Zip Code TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to Thanksgiving Food Giveaway
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/13 Rpt: 67/72	2 FILER NAME Thomas, Katherine N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086046
4 Date 10/15/2025	5 Payee name Martin Luther King Jr. Parade Foundation dba Black Heritage Society	
6 Amount (\$) \$395.00	7 Payee address; City; State; Zip Code 400 N Sam Houston Parkway E Suite 210  Houston, TX 77060	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MLK Jr. Parade Entry Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/23/2025	Payee name Posh Pop Balloons	
Amount (\$) \$440.00	Payee address; City; State; Zip Code  Houston , TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Decorations for Fundraiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name Rho Xi Chapter of Omega Psi Phi Fraternity, Inc. Golf Tournament	
Amount (\$) \$250.00	Payee address; City; State; Zip Code  Pearland, TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to support educational scholarships through Rho Xi's annual Golf Tournament.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/13 Rpt: 68/72	2 FILER NAME Thomas, Katherine N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086046
4 Date 10/23/2025	5 Payee name Specs	
6 Amount (\$) \$113.92	7 Payee address; City; State; Zip Code 2410 Smith Street  Houston, TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gift for Fundraiser Host
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/29/2025	Payee name Specs	
Amount (\$) \$160.38	Payee address; City; State; Zip Code 2410 Smith Street  Houston, TX 77006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Beverages for Fundraiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/29/2025	Payee name The Art Group, LLC.	
Amount (\$) \$108.25	Payee address; City; State; Zip Code  Houston, TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Videography
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/13 Rpt: 69/72	2 FILER NAME Thomas, Katherine N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086046
4 Date 09/10/2025	5 Payee name The Art Group, LLC.	
6 Amount (\$) \$40.00	7 Payee address; City; State; Zip Code  Houston, TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Videography
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/07/2025	Payee name The Art Group, LLC.	
Amount (\$) \$100.00	Payee address; City; State; Zip Code  Houston, TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Videography
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/31/2025	Payee name The Art Group, LLC.	
Amount (\$) \$100.00	Payee address; City; State; Zip Code  TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Videography
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/13 Rpt: 70/72	2 FILER NAME Thomas, Katherine N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086046
4 Date 08/23/2025	5 Payee name The Art Group, LLC.	
6 Amount (\$) \$162.37	7 Payee address; City; State; Zip Code  Houston, TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Videography
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name The Art Group, LLC.	Office sought Office held
Date 10/09/2025	Payee name The Art Group, LLC.	
Amount (\$) \$150.00	Payee address; City; State; Zip Code  Houston, TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Videography
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name The Art Group, LLC.	Office sought Office held
Date 10/27/2025	Payee name The Art Group, LLC.	
Amount (\$) \$50.00	Payee address; City; State; Zip Code  Houston, TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Videography
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name The Art Group, LLC.	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/13 Rpt: 71/72	2 FILER NAME Thomas, Katherine N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086046
4 Date 11/10/2025	5 Payee name The Art Group, LLC.	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code  TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Videography
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name The Art Group, LLC.	Office sought Office held
Date 11/17/2025	Payee name The Art Group, LLC.	
Amount (\$) \$200.00	Payee address; City; State; Zip Code  Houston, TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Videography
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name The Art Group, LLC.	Office sought Office held
Date 11/26/2025	Payee name The Art Group, LLC.	
Amount (\$) \$50.00	Payee address; City; State; Zip Code  Houston, TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Videography
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name The Art Group, LLC.	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/13 Rpt: 72/72	2 FILER NAME Thomas, Katherine N. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086046
4 Date 10/01/2025	5 Payee name The Ensemble Theatre Gala 2025	
6 Amount (\$) \$625.00	7 Payee address; City; State; Zip Code 3535 Main Street  Houston, TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ensemble Theatre Gala
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/22/2025	Payee name Timeless Moments Studio	
Amount (\$) \$350.00	Payee address; City; State; Zip Code  Washington , DC	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/19/2025	Payee name Zazzle	
Amount (\$) \$526.00	Payee address; City; State; Zip Code  TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday Cards.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held