

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 1

<b>The JC/OH Instruction Guide explains how to complete this form.</b>		<b>1 Filer ID</b> (Ethics Commission Filers) 00086011	<b>2 Total pages filed:</b>  47								
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	<table style="width: 100%;"> <tr> <td style="width: 30%;">MS / MRS / MR The Honorable</td> <td style="width: 30%;">FIRST Teresa J.</td> <td style="width: 40%;">MI</td> </tr> </table>		MS / MRS / MR The Honorable	FIRST Teresa J.	MI	<b>OFFICE USE ONLY</b>  Date Received <b>ELECTRONICALLY FILED</b> 01/15/2026					
	MS / MRS / MR The Honorable	FIRST Teresa J.	MI								
<table style="width: 100%;"> <tr> <td style="width: 30%;">NICKNAME</td> <td style="width: 30%;">LAST Waldrop</td> <td style="width: 40%;">SUFFIX</td> </tr> </table>		NICKNAME	LAST Waldrop	SUFFIX							
NICKNAME	LAST Waldrop	SUFFIX									
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE  <div style="background-color: black; color: white; text-align: center; padding: 5px;"> <b>REDACTED PER 254.0313, GOV'T CODE</b> </div>		Date Hand-delivered or Date Postmarked  <table style="width: 100%;"> <tr> <td style="width: 50%;">Receipt #</td> <td style="width: 50%;">Amount</td> </tr> </table> Date Processed  Date Imaged	Receipt #	Amount						
	Receipt #	Amount									
	<table style="width: 100%;"> <tr> <td style="width: 30%;">MS / MRS / MR Ms.</td> <td style="width: 30%;">FIRST Pamela E.</td> <td style="width: 40%;">MI</td> </tr> </table>		MS / MRS / MR Ms.	FIRST Pamela E.	MI						
	MS / MRS / MR Ms.	FIRST Pamela E.	MI								
<table style="width: 100%;"> <tr> <td style="width: 30%;">NICKNAME</td> <td style="width: 30%;">LAST Powell</td> <td style="width: 40%;">SUFFIX</td> </tr> </table>		NICKNAME	LAST Powell	SUFFIX							
NICKNAME	LAST Powell	SUFFIX									
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  <div style="background-color: black; color: white; text-align: center; padding: 5px;"> <b>REDACTED PER 254.0313, GOV'T CODE</b> </div>											
<b>6 CAMPAIGN TREASURER ADDRESS</b>  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  <div style="background-color: black; color: white; text-align: center; padding: 5px;"> <b>REDACTED PER 254.0313, GOV'T CODE</b> </div>										
<b>7 CAMPAIGN TREASURER PHONE</b>	AREA CODE PHONE NUMBER EXTENSION (713) 597-8700										
<b>8 REPORT TYPE</b>	<table style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded modified reporting limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH-FR)</td> </tr> </table>			<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)
<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)								
<b>9 PERIOD COVERED</b>	Month Day Year      Month Day Year 07/01/2025      THROUGH      12/31/2025										
<b>10 ELECTION</b>	<table style="width: 100%;"> <tr> <td style="width: 40%;">           ELECTION DATE            Month Day Year            03/03/2026         </td> <td style="width: 60%;">           ELECTION TYPE  <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> Runoff    <input type="checkbox"/> Other  <input type="checkbox"/> General    <input type="checkbox"/> Special         </td> </tr> </table>			ELECTION DATE Month Day Year 03/03/2026	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special						
ELECTION DATE Month Day Year 03/03/2026	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special										
<b>11 OFFICE</b>	OFFICE HELD (if any) District Judge District 312 Harris		<b>12 OFFICE SOUGHT (if known)</b> District Judge District 312								

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# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

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<b>13 C / OH NAME</b> Waldrop, Teresa J. (The Honorable)	<b>14 Filer ID</b> (Ethics Commission Filers) 00086011
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> Additional Pages	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.		
	<b>COMMITTEE TYPE</b>  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE NAME</b>	
		<b>COMMITTEE ADDRESS</b>	
		<b>COMMITTEE CAMPAIGN TREASURER NAME</b>	
		<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>	
<b>16 CONTRIBUTION TOTALS</b>	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)	\$ 7,350.00
<b>EXPENDITURE TOTALS</b>	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4.	<b>TOTAL POLITICAL EXPENDITURES</b>	\$ 47,159.01
<b>CONTRIBUTION BALANCE</b>	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 43,456.41
<b>OUTSTANDING LOAN TOTALS</b>	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 39,600.00

<b>17 AFFIDAVIT</b>		
<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>  <div style="text-align: right;"><u>The Honorable Teresa J. Waldrop</u> Signature of Candidate or Officeholder</div>		
<p>AFFIX NOTARY STAMP / SEAL ABOVE</p>		
<p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p>		
<div style="display: flex; justify-content: space-between;"><div>_____ Signature of officer administering oath</div><div>_____ Printed name of officer administering oath</div><div>_____ Title of officer administering oath</div></div>		

# SUBTOTALS - JC/OH

FORM JC/OH  
COVER SHEET PG 3

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<b>18 FILER NAME</b> Waldrop, Teresa J. (The Honorable)		<b>19 Filer ID</b> 00086011	(Ethics Commission Filers)
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	7,350.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
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	\$	42,622.05
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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	4,536.96
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 checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	53.50

# 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: 1/3 Rpt: 4/47
<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 12/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adler, David <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston , TX 77008	<b>7</b> Amount of Contribution (\$)  <div style="text-align: right;">\$500.00</div>
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm David Adler PC		<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 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bishay, James <hr/> Contributor address; City; State; Zip Code  Spring, TX 77373	Amount of Contribution (\$)  <div style="text-align: right;">\$100.00</div>
Contributor's Principal Occupation Manager		Contributor's Job Title Manager
Contributor's employer/law firm Self-employed		Law firm of contributor's spouse (if any)
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#: _____) Gunn, David <hr/> Contributor address; City; State; Zip Code  Baytown, TX 77521	Amount of Contribution (\$)  <div style="text-align: right;">\$1,000.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Law Firm of David C. Gunn		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: 2/3 Rpt: 5/47
<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 07/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Ronnie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002	<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 Harrison Law Office, PC		<b>11</b> Law firm of contributor's spouse (if any) Harrison Law Office, PC
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowery, Barbara <hr/> Contributor address; City; State; Zip Code  Midlothian, VA 23113	Amount of Contribution (\$)  \$300.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm N/A		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#: _____) Revack, Wayne <hr/> 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 Revack, Samaan & Muller LLP		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: 3/3 Rpt: 6/47
<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 07/13/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slate, Dennis <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77006	<b>7</b> Amount of Contribution (\$)  <div style="text-align: right;">\$2,000.00</div>
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Slate & Associates		<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 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Enrique <hr/> Contributor address; City; State; Zip Code  Spring, TX 77386	Amount of Contribution (\$)  <div style="text-align: right;">\$2,500.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Torres Law Group PC		Law firm of contributor's spouse (if any)
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#: _____) Vuong, David Liet <hr/> Contributor address; City; State; Zip Code  Houston, TX 77082	Amount of Contribution (\$)  <div style="text-align: right;">\$200.00</div>
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Offices of David C. Vuong & Associates		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/37 Rpt: 7/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 10/17/2025	<b>5</b> Payee name Allied Printing Services	
<b>6</b> Amount (\$) \$1,422.95	<b>7</b> Payee address; City; State; Zip Code 4507 Enchantedgate Drive  Spring, TX 77373	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign t-shirts & yard signs
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/29/2025	Payee name American Inns of Court	
Amount (\$) \$685.00	Payee address; City; State; Zip Code 225 Reinekers Lane, Suite 770  Alexandria, VA 22314	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Burta Rhoads Raborn Family Law Inns of Court 2025-2026 Membership dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/21/2025	Payee name Area 5 Democrats	
Amount (\$) \$110.00	Payee address; City; State; Zip Code 3800 Spencer Hwy Suite L Pasadena, TX 77504	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Petition Potluck seat sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/37 Rpt: 8/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 09/16/2025	<b>5</b> Payee name Area 5 Democrats	
<b>6</b> Amount (\$) \$100.00	<b>7</b> Payee address; City; State; Zip Code 3800 Spencer Hwy Suite L Pasadena, TX 77504	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 3d Petition Potluck event - seat sponsorship
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2025	Payee name Area 5 Democrats	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 3800 Spencer Hwy Suite L Pasadena, TX 77504	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</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 Fall fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2025	Payee name Area 5 Democrats	
Amount (\$) \$55.00	Payee address; City; State; Zip Code 3800 Spencer Hwy Suite L Pasadena, TX 77504	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</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 Party donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/37 Rpt: 9/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 08/04/2025	<b>5</b> Payee name Asian American Bar Association of Houston	
<b>6</b> Amount (\$) \$30.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 1554  Houston , TX 77251	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</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 renewal
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2025	Payee name Association of Women Attorneys	
Amount (\$) \$40.00	Payee address; City; State; Zip Code 2450 Louisiana Street Suite 400-301 Houston , TX 77006	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</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 renewal dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/21/2025	Payee name Bay Area Democratic Movement	
Amount (\$) \$120.00	Payee address; City; State; Zip Code PO Box 590383  Houston , TX 77259	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sustaining membership dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/37 Rpt: 10/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 09/08/2025	<b>5</b> Payee name CVS	
<b>6</b> Amount (\$) \$3.24	<b>7</b> Payee address; City; State; Zip Code 402 Gray Street  Houston, TX 77002	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 8 x 10 photo for Area 5 Dems display
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/07/2025	Payee name Canva	
Amount (\$) \$30.00	Payee address; City; State; Zip Code 110 Kippax Street  Surry Hills New South Wales 2010 Australia	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design software monthly subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/08/2025	Payee name Canva	
Amount (\$) \$30.00	Payee address; City; State; Zip Code 110 Kippax Street  Surry Hills New South Wales 2010 Australia	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design software subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/37 Rpt: 11/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 10/27/2025	<b>5</b> Payee name Canva	
<b>6</b> Amount (\$) \$30.00	<b>7</b> Payee address; City; State; Zip Code 110 Kippax Street  Surry Hills New South Wales 2010 Australia	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design software subscription
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/26/2025	Payee name Canva	
Amount (\$) \$30.00	Payee address; City; State; Zip Code 110 Kippax Street  Surry Hills New South Wales 2010 Australia	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design software subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/26/2025	Payee name Canva	
Amount (\$) \$30.00	Payee address; City; State; Zip Code 110 Kippax Street  Surry Hills New South Wales 2010 Australia	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design software subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/37 Rpt: 12/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 09/15/2025	<b>5</b> Payee name Cypress-Tomball Democrats	
<b>6</b> Amount (\$) \$30.00	<b>7</b> Payee address; City; State; Zip Code 12215 Moorcreek Drive  Houston, TX 77070	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</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
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/09/2025	Payee name Democrats of La Porte	
Amount (\$) \$30.00	Payee address; City; State; Zip Code 902 Shadow Creek Dr  La Porte, TX 77571	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Petition signing event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/30/2025	Payee name Denver Harbor Civic Club	
Amount (\$) \$125.00	Payee address; City; State; Zip Code P.O. Box 15027  Houston, TX 77220-5027	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Lawn service equipment fundraiser - lawn services for seniors/residents living in Denver Harbor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/37 Rpt: 13/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 09/29/2025	<b>5</b> Payee name Earth to Mars Cafe	
<b>6</b> Amount (\$) \$28.14	<b>7</b> Payee address; City; State; Zip Code 3302 Canal St  Houston, TX 77003	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch w HCDP apprentice
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2025	Payee name Earth to Mars Cafe	
Amount (\$) \$394.44	Payee address; City; State; Zip Code 3302 Canal St  Houston, TX 77003	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 312th Presiding month to provide lunch for Family Law Board Presiding & AJs mtgs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/18/2025	Payee name East Houston Democrats	
Amount (\$) \$30.00	Payee address; City; State; Zip Code linktr.ee/easthoustondemocrats.  Houston, TX	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/37 Rpt: 14/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 09/08/2025	<b>5</b> Payee name Fiesta en Guadalajara	
<b>6</b> Amount (\$) \$35.00	<b>7</b> Payee address; City; State; Zip Code 3522 Irvington Blvd  Houston , TX 77009	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Precinct chairs breakfast
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/18/2025	Payee name Frank's Pizza	
Amount (\$) \$78.00	Payee address; City; State; Zip Code 417 Travis  Houston , TX 77002	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 312th Summer intern farewell lunch for staff
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2025	Payee name From Scratch by Holmes	
Amount (\$) \$182.11	Payee address; City; State; Zip Code 1300 N Post Oak Rd  Houston, TX 77055	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Family Law Judges Seniors Breakfast with Houston Heights Towers residents
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/37 Rpt: 15/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 07/21/2025	<b>5</b> Payee name Greater Heights Democrats	
<b>6</b> Amount (\$) \$23.00	<b>7</b> Payee address; City; State; Zip Code http://greaterheightsdemocrats.com/  Houston , TX 77007	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</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 renewal
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/19/2025	Payee name H-E-B	
Amount (\$) \$223.43	Payee address; City; State; Zip Code 1701 West Alabama  Houston , TX 77098	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lead Clerk's birthday celebration & gift
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/25/2025	Payee name H-E-B	
Amount (\$) \$69.10	Payee address; City; State; Zip Code 1701 West Alabama  Houston , TX 77098	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Birthday celebrations - 312th CT Coordinator & Judge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/37 Rpt: 16/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 09/29/2025	<b>5</b> Payee name H-E-B	
<b>6</b> Amount (\$) \$96.11	<b>7</b> Payee address; City; State; Zip Code 1701 West Alabama  Houston , TX 77098	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 312th Court Reporter birthday celebration
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/24/2025	Payee name H-E-B	
Amount (\$) \$31.86	Payee address; City; State; Zip Code 1701 West Alabama  Houston , TX 77098	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 312th Staff appreciation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2025	Payee name H-E-B	
Amount (\$) \$30.30	Payee address; City; State; Zip Code 1701 West Alabama  Houston , TX 77098	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 312th Staff appreciation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/37 Rpt: 17/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 12/01/2025	<b>5</b> Payee name H-E-B	
<b>6</b> Amount (\$) \$22.58	<b>7</b> Payee address; City; State; Zip Code 1701 West Alabama  Houston , TX 77098	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Poinsettias for 312th
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2025	Payee name H-E-B	
Amount (\$) \$112.27	Payee address; City; State; Zip Code 1701 West Alabama  Houston , TX 77098	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 312th 3d Clerk college graduation celebration
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/10/2025	Payee name H-E-B	
Amount (\$) \$70.99	Payee address; City; State; Zip Code 1701 West Alabama  Houston , TX 77098	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 312th Presiding Month - supplies & food for Fam Law Division Presiding & AJ lunch
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/37 Rpt: 18/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 12/15/2025	<b>5</b> Payee name H-E-B	
<b>6</b> Amount (\$) \$806.22	<b>7</b> Payee address; City; State; Zip Code 1701 West Alabama  Houston , TX 77098	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</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 gifts for 312th staff
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2025	Payee name Harris County Benevolent Fund	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 201 Caroline Street 17th Floor Houston, TX 77002	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HarCo Family Law Judges Board benevolent fund contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/14/2025	Payee name Harris County Democratic Party	
Amount (\$) \$30.00	Payee address; City; State; Zip Code 3302 Canal St  Houston, TX 77003	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly sustaining membership contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/37 Rpt: 19/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 07/15/2025	<b>5</b> Payee name Harris County Democratic Party	
<b>6</b> Amount (\$) \$10,000.00	<b>7</b> Payee address; City; State; Zip Code 3302 Canal St  Houston, TX 77003	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Coordinated Campaign contribution
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/11/2025	Payee name Harris County Democratic Party	
Amount (\$) \$30.00	Payee address; City; State; Zip Code 3302 Canal St  Houston, TX 77003	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly sustaining membership contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/09/2025	Payee name Harris County Democratic Party	
Amount (\$) \$30.00	Payee address; City; State; Zip Code 3302 Canal St  Houston, TX 77003	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly sustaining membership contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 14/37 Rpt: 20/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 09/26/2025	<b>5</b> Payee name Harris County Democratic Party	
<b>6</b> Amount (\$) \$5,000.00	<b>7</b> Payee address; City; State; Zip Code 3302 Canal St  Houston, TX 77003	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense March into 2026 HCDP JJLR Gala table
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2025	Payee name Harris County Democratic Party	
Amount (\$) \$30.00	Payee address; City; State; Zip Code 3302 Canal St  Houston, TX 77003	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly sustaining membership contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2025	Payee name Harris County Democratic Party	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 3302 Canal St  Houston, TX 77003	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Primary Application filing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 15/37 Rpt: 21/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 12/04/2025	<b>5</b> Payee name Harris County Democratic Party	
<b>6</b> Amount (\$) \$30.00	<b>7</b> Payee address; City; State; Zip Code 3302 Canal St  Houston, TX 77003	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly sustaining membership contribution
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/19/2025	Payee name Harris County Republican Party	
Amount (\$) \$84.15	Payee address; City; State; Zip Code 8588 Katy Fwy #445  Spring Valley Village, TX 77024	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Copy of application
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2025	Payee name Home Depot	
Amount (\$) \$59.47	Payee address; City; State; Zip Code 2777 Katy Freeway Service Road  Houston , TX 77077	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Poinsettias for 312th
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 16/37 Rpt: 22/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 12/09/2025	<b>5</b> Payee name House of Pies	
<b>6</b> Amount (\$) \$21.35	<b>7</b> Payee address; City; State; Zip Code 3112 Kirby Drive  Houston, TX 77098	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pie for Area 5 Holiday Party
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/28/2025	Payee name Houston Bar Foundation	
Amount (\$) \$296.40	Payee address; City; State; Zip Code 1000 Louisiana Ste 3600  Houston, TX 77002	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HBA Harvest Party ticket
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/21/2025	Payee name Houston Black American Democrats	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 4806 Edfield St  Houston, TX 77033	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</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 renewal
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 17/37 Rpt: 23/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 12/24/2025	<b>5</b> Payee name Houston Black American Democrats	
<b>6</b> Amount (\$) \$100.00	<b>7</b> Payee address; City; State; Zip Code 4806 Edfield St  Houston, TX 77033	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</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 renewal
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2025	Payee name Houston LGBTQ+ Political Caucus	
Amount (\$) \$250.00	Payee address; City; State; Zip Code Post Office Box 66664  Houston, TX 77266-6664	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Equality Brunch ticket
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2025	Payee name Houston Lawyers Association	
Amount (\$) \$500.00	Payee address; City; State; Zip Code P.O. Box 300009  Houston , TX 77230	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Table sponsor - HLA Driving Excellence & Impact Scholarship luncheon
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/37 Rpt: 24/47	2 FILER NAME Waldrop, Teresa J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086011
4 Date 11/10/2025	5 Payee name Hutchings, Dawn	
6 Amount (\$) \$66.95	7 Payee address; City; State; Zip Code 201 Caroline Street 16th Floor Houston, TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for 312th 3d Clerk birthday celebration cost
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2025	Payee name Impacting Houston, Inc.	
Amount (\$) \$100.00	Payee address; City; State; Zip Code P.O. Box 15855  Houston, TX 77220-5855	
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 Bikes for Impacting Houston, Inc. Winter Wonderland Toy Giveaway on 12-20-2025 at Hobart Taylor Park
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/21/2025	Payee name Kirby Ice House	
Amount (\$) \$107.60	Payee address; City; State; Zip Code 3333 Eastside  Houston, TX 77098	
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 Portion of cost of HarCo Dem Judges petition signing 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  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 19/37 Rpt: 25/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 10/21/2025	<b>5</b> Payee name Kirby Ice House	
<b>6</b> Amount (\$) \$53.30	<b>7</b> Payee address; City; State; Zip Code 3333 Eastside  Houston, TX 77098	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Judge Heath's portion of HarCo Dem judges petition signing event - to be reimbursed to Judge Waldrop
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2025	Payee name League of Women Voters Houston	
Amount (\$) \$75.00	Payee address; City; State; Zip Code P.O. Box 270269  Houston, TX 77277-0269	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense \$75 Dues (LWV of Houston \$15.00; LWV of Texas \$35.25)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/08/2025	Payee name Luby's	
Amount (\$) \$35.00	Payee address; City; State; Zip Code 13111 Northwest Freeway Suite 600 Houston , TX 77040	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Precinct Chairs breakfast
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 20/37 Rpt: 26/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 10/24/2025	<b>5</b> Payee name Mexican American Bar Association Houston	
<b>6</b> Amount (\$) \$300.00	<b>7</b> Payee address; City; State; Zip Code P.O. BOX 303  Houston , TX 77001-0303	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ticket for seat at judge's table at MABAH Gala
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2025	Payee name Meyerland Area Democrat Club	
Amount (\$) \$250.00	Payee address; City; State; Zip Code PO Box 310061  Houston , TX 77231	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</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
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/16/2025	Payee name Mi Tienda	
Amount (\$) \$9.99	Payee address; City; State; Zip Code 1630 Spencer Hwy  South Houston, TX 77587	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cake for Area 5 Dems 3d Petition Potluck petition signing event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 21/37 Rpt: 27/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 09/23/2025	<b>5</b> Payee name Night Court	
<b>6</b> Amount (\$) \$100.00	<b>7</b> Payee address; City; State; Zip Code 7503 Shadyvilla Lane  Houston , TX 77055	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</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 Night Court production
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2025	Payee name Nothing Bundt Cakes	
Amount (\$) \$48.89	Payee address; City; State; Zip Code 5115 Buffalo Speedway Suite 400,  Houston, TX 77005	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 312th 3d Clerk college graduation celebration
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/21/2025	Payee name Oak Forest Area Democrats	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 4619 Lyons Ave  Houston, TX 77020	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 18th Anniversary Fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 22/37 Rpt: 28/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 08/18/2025	<b>5</b> Payee name Office Depot	
<b>6</b> Amount (\$) \$28.64	<b>7</b> Payee address; City; State; Zip Code 3443 Kirby  Houston , TX 77098	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign supplies
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/20/2025	Payee name Office Max	
Amount (\$) \$6.48	Payee address; City; State; Zip Code 1576 West Gray  Houston , TX 77019	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign supplies - clip boards
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/03/2025	Payee name Pure Justice	
Amount (\$) \$106.20	Payee address; City; State; Zip Code 3418 Hwy 6 South, Suite B-314  Houston , TX 77082	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</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
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 23/37 Rpt: 29/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 11/17/2025	<b>5</b> Payee name ROAD Women	
<b>6</b> Amount (\$) \$100.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 22678  Houston , TX 77227	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</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 fundraiser
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/14/2025	Payee name Raise The Money, Inc.	
Amount (\$) \$24.75	Payee address; City; State; Zip Code P.O. Box 26466  Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charge on donation from David Adler
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/25/2025	Payee name Raise The Money, Inc.	
Amount (\$) \$122.75	Payee address; City; State; Zip Code P.O. Box 26466  Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charge on donation from Enrique Torres
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 24/37 Rpt: 30/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 08/13/2025	<b>5</b> Payee name Raise The Money, Inc.	
<b>6</b> Amount (\$) \$5.15	<b>7</b> Payee address; City; State; Zip Code P.O. Box 26466  Little Rock, AR 72221	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charge on donation from James Bishay
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/13/2025	Payee name Raise The Money, Inc.	
Amount (\$) \$98.25	Payee address; City; State; Zip Code P.O. Box 26466  Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charge on donation from Dennis Slate
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/01/2025	Payee name Raise The Money, Inc.	
Amount (\$) \$12.50	Payee address; City; State; Zip Code P.O. Box 26466  Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charge on donation from Wayne Revack
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 25/37 Rpt: 31/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 07/01/2025	<b>5</b> Payee name Raise The Money, Inc.	
<b>6</b> Amount (\$) \$24.75	<b>7</b> Payee address; City; State; Zip Code P.O. Box 26466  Little Rock, AR 72221	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charge on donation from Ronnie Harrison
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/01/2025	Payee name Raise The Money, Inc.	
Amount (\$) \$12.50	Payee address; City; State; Zip Code P.O. Box 26466  Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Charge on donation from Arpita Legha
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/15/2025	Payee name Randalls	
Amount (\$) \$104.30	Payee address; City; State; Zip Code 2225 Louisiana Street  Houston , TX 77002	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 312th Summer Intern Farewell lunch supplies & gift
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 26/37 Rpt: 32/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 09/05/2025	<b>5</b> Payee name Run Sister Run PAC	
<b>6</b> Amount (\$) \$60.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 66470  Houston , TX 77266	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual afternoon tea fundraiser
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/28/2025	Payee name Southwest Democrats	
Amount (\$) \$10.00	Payee address; City; State; Zip Code PO Box 2053  Bellaire, TX 77402	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly sustaining membership
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/28/2025	Payee name Southwest Democrats	
Amount (\$) \$10.00	Payee address; City; State; Zip Code PO Box 2053  Bellaire, TX 77402	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly sustaining membership
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 27/37 Rpt: 33/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 09/29/2025	<b>5</b> Payee name Southwest Democrats	
<b>6</b> Amount (\$) \$10.00	<b>7</b> Payee address; City; State; Zip Code PO Box 2053  Bellaire, TX 77402	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly sustaining membership
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/03/2025	Candidate/Officeholder name Office sought Office held	
Payee name Southwest Democrats		
Amount (\$) \$10.00	Payee address; City; State; Zip Code PO Box 2053  Bellaire, TX 77402	
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 Monthly sustaining membership
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/28/2025	Candidate/Officeholder name Office sought Office held	
Payee name Southwest Democrats		
Amount (\$) \$10.00	Payee address; City; State; Zip Code PO Box 2053  Bellaire, TX 77402	
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 Monthly sustaining membership
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 28/37 Rpt: 34/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 12/29/2025	<b>5</b> Payee name Southwest Democrats	
<b>6</b> Amount (\$) \$10.00	<b>7</b> Payee address; City; State; Zip Code PO Box 2053  Bellaire, TX 77402	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly sustaining membership
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2025	Payee name Squarespace, Inc.	
Amount (\$) \$20.00	Payee address; City; State; Zip Code 225 Varick Street, 12th Floor  New York, NY 10014	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain annual renewal
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/06/2025	Payee name State Bar of Texas	
Amount (\$) \$75.00	Payee address; City; State; Zip Code 1414 Colorado Street  Austin, TX 78701	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texas Bar College - Annual renewal dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 29/37 Rpt: 35/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 07/21/2025	<b>5</b> Payee name Texas Center for the Judiciary	
<b>6</b> Amount (\$) \$240.00	<b>7</b> Payee address; City; State; Zip Code 1210 San Antonio Ste 800 Austin, TX 78701	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</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
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/21/2025	Payee name Texas Gulf Coast Area Labor Federation	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 2506 Sutherland St  Houston, TX 77023	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Women of Labor Breakfast sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/21/2025	Payee name Texas Lawyers Insurance Exchange	
Amount (\$) \$600.00	Payee address; City; State; Zip Code 1800 S Mopac Ste 300  Austin, TX 78746	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Insurance	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Insurance policy for 2025
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 30/37 Rpt: 36/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 12/30/2025	<b>5</b> Payee name Texas Lawyers Insurance Exchange	
<b>6</b> Amount (\$) \$1,500.00	<b>7</b> Payee address; City; State; Zip Code 1800 S Mopac Ste 300  Austin, TX 78746	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Insurance	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Insurance policy for 2026
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2025	Payee name The Council on Recovery	
Amount (\$) \$153.84	Payee address; City; State; Zip Code 303 Jackson Hill  Houston, TX 77007	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</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 following luncheon
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/25/2025	Payee name Treebeards The Cloister	
Amount (\$) \$48.00	Payee address; City; State; Zip Code 1117 Texas Avenue  Houston , TX 77002	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Area 5 Dems Petition Potluck event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 31/37 Rpt: 37/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 12/22/2025	<b>5</b> Payee name United States Postal Service	
<b>6</b> Amount (\$) \$78.00	<b>7</b> Payee address; City; State; Zip Code 1500 Hadley  Houston , TX 77001	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Book of stamps
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/17/2025	Payee name Vic & Anthony's	
Amount (\$) \$125.00	Payee address; City; State; Zip Code 1510 Texas Avenue  Houston, TX 77002	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Deposit for 312th Holiday Luncheon
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2025	Payee name Vic & Anthony's	
Amount (\$) \$1,238.41	Payee address; City; State; Zip Code 1510 Texas Avenue  Houston, TX 77002	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 312th Holiday Luncheon
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 32/37 Rpt: 38/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 07/01/2025	<b>5</b> Payee name Waldrop, Teresa	
<b>6</b> Amount (\$) \$3,399.31	<b>7</b> Payee address; City; State; Zip Code P.O. Box 226  Houston, TX 77001	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for personal American Express charge for \$3,399.31 for 5-16-2025 fundraiser
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/07/2025	Payee name Waldrop, Teresa	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P.O. Box 226  Houston, TX 77001	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement of TJW BOA chk #2501 loan to campaign on 2-8-2025
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/07/2025	Payee name Waldrop, Teresa	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P.O. Box 226  Houston, TX 77001	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement of TJW BOA chk #2503 loan to campaign on 3-16-2025
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 33/37 Rpt: 39/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 08/11/2025	<b>5</b> Payee name Waldrop, Teresa	
<b>6</b> Amount (\$) \$5,000.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 226  Houston, TX 77001	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimb BOA #2336 \$5k on 12-09-21 for Coordinated Campaign contrib (7-1-21 to 12-31-21 TEC Report)
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/12/2025	Payee name Waldrop, Teresa	
Amount (\$) \$360.53	Payee address; City; State; Zip Code P.O. Box 226  Houston, TX 77001	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phoenicia: 1-05-25; 312th month for providing Fam Law PJ Bd, AJ & Coords lunch (F4 '25 Jan-Jun)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/12/2025	Payee name Waldrop, Teresa	
Amount (\$) \$201.06	Payee address; City; State; Zip Code P.O. Box 226  Houston, TX 77001	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2-08-2025: Contribution to TADJ (F4 '25 Jan-Jun)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 34/37 Rpt: 40/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 07/12/2025	<b>5</b> Payee name Waldrop, Teresa	
<b>6</b> Amount (\$) \$73.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 226  Houston, TX 77001	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Frank's Pizza: 2-01-2025; Lunch for 312th staff (F4 '25 Jan-Jun)
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/12/2025	Payee name Waldrop, Teresa	
Amount (\$) \$360.00	Payee address; City; State; Zip Code P.O. Box 226  Houston, TX 77001	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2-18-2025: PO Box annual renewal (F4 '25 Jan-Jun)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/12/2025	Payee name Waldrop, Teresa	
Amount (\$) \$7.95	Payee address; City; State; Zip Code P.O. Box 226  Houston, TX 77001	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Uber: 2-27-2025: from State Capitol in Austin, Texas (F4 '25 Jan-Jun)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 35/37 Rpt: 41/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 07/12/2025	<b>5</b> Payee name Waldrop, Teresa	
<b>6</b> Amount (\$) \$7.97	<b>7</b> Payee address; City; State; Zip Code P.O. Box 226  Houston, TX 77001	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Uber: 2-27-2025 to State Capitol in Austin, Texas (F4 '25 Jan-Jun)
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/12/2025	Payee name Waldrop, Teresa	
Amount (\$) \$25.00	Payee address; City; State; Zip Code P.O. Box 226  Houston, TX 77001	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Raise The Money: 5-12-2025; Test of online fundraising platform (F4 '25 Jan-Jun)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/12/2025	Payee name Waldrop, Teresa	
Amount (\$) \$30.00	Payee address; City; State; Zip Code P.O. Box 226  Houston, TX 77001	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canva design software: 6-6-2025; (F4 '25 Jul-Dec)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 36/37 Rpt: 42/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 07/12/2025	<b>5</b> Payee name Waldrop, Teresa	
<b>6</b> Amount (\$) \$30.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 226  Houston, TX 77001	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canva design software: 5-6-2025 (F4 '25 Jan-Jun)
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/12/2025	Payee name Waldrop, Teresa	
Amount (\$) \$18.89	Payee address; City; State; Zip Code P.O. Box 226  Houston, TX 77001	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Uber: 6-6-2025 from The Council on Recovery luncheon (F4 '25 Jan-Jun)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/12/2025	Payee name Waldrop, Teresa	
Amount (\$) \$200.00	Payee address; City; State; Zip Code P.O. Box 226  Houston, TX 77001	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TBLS renewal dues: 5-2-2025 (F4 '25 Jan-Jun)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 37/37 Rpt: 43/47	2 FILER NAME Waldrop, Teresa J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086011
4 Date 07/12/2025	5 Payee name Waldrop, Teresa	
6 Amount (\$) \$20.98	7 Payee address; City; State; Zip Code P.O. Box 226  Houston, TX 77001	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Uber to HLA Gala: 5-4-2025 (F4 '25 Jan-Jun)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought  Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 1/2 Rpt: 44/47	<b>2</b> FILER NAME Waldrop, Teresa J. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00086011
<b>4</b> Date 07/06/2025	<b>5</b> Payee name American Express	
<b>6</b> Amount (\$) \$3,399.31  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code P.O. Box 650448  Dallas, TX 75265-0448	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 5-22-2025 Maven campaign fundraiser
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/06/2025	Payee name American Express	
Amount (\$) \$25.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 650448  Dallas, TX 75265-0448	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Test of the Raise The Money online fundraising platform for reelection campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/06/2025	Payee name American Express	
Amount (\$) \$30.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 650448  Dallas, TX 75265-0448	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canva design software subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 2/2 Rpt: 45/47		2 FILER NAME Waldrop, Teresa J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086011	
4 Date 08/06/2025		5 Payee name American Express			
6 Amount (\$) \$30.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code P.O. Box 650448  Dallas, TX 75265-0448			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canva design software subscription	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/06/2025		Payee name American Express			
Amount (\$) \$1,052.65  <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code P.O. Box 650448  Dallas, TX 75265-0448			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Lodging at judicial conference		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel Rumbao - lodging while attending National Judicial College's 2025 Ct Admin Academy for Judges	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:  
Sch: 1/1 Rpt: 46/47

2 FILER NAME

Waldrop, Teresa J. (The Honorable)

3 Filer ID (Ethics Commission Filers)  
00086011

4 Date

11/03/2025

5 Name of person from whom amount is received

Sonya Heath Campaign

8 Amount (\$)

\$53.50

6 Address of person from whom amount is received; City; State; Zip Code

Houston, TX 77001

7 Purpose for which amount is received

Reimbursement for Kirby Icehouse Petition Signing Event

☐ Check if political contribution returned to filer

# OUTSTANDING LOANS

## SCHEDULE L

The Instruction Guide explains how to complete this form.

1 Total pages Schedule L:  
Sch: 1/1 Rpt: 47/47

2 FILER NAME

Waldrop, Teresa J. (The Honorable)

3 Filer ID (Ethics Commission Filers)  
00086011

LENDER  
INFORMATION

4 Name of lender  
Waldrop, Teresa

5 Lender address; City; State; Zip Code

Houston, TX 77001

GUARANTOR  
INFORMATION

6 Name of guarantor

☒ not applicable

7 Guarantor address; City; State; Zip Code