

**COUNTY EXECUTIVE COMMITTEE
CAMPAIGN FINANCE REPORT**

**FORM CEC
COVER SHEET PG 1**

The CEC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00056261	2 Total pages filed: 112			
3 COMMITTEE NAME Fort Bend County Democratic Party (CEC)		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2026 Date Hand-delivered or Date Postmarked Receipt # <input type="text"/> Amount <input type="text"/> Date Processed Date Imaged				
4 COMMITTEE ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 13515 Southwest Freeway Suite. 204 Sugarland, TX 77478						
5 CAMPAIGN TREASURER NAME MS / MRS / MR FIRST April						
NICKNAME LAST Jones						
SUFFIX						
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 8506 Rose Garden Drive Houston, TX 77083			APT / SUITE #;	CITY;	STATE;
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; 8506 Rose Garden Drive Houston, TX 77083	APT / SUITE #;	CITY;	STATE;	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE (713) 822-8699	PHONE NUMBER	EXTENSION			
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Final Report <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff					
10 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
11 ELECTION	ELECTION DATE Month Day Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special				

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**COUNTY EXECUTIVE COMMITTEE REPORT:
PURPOSE & TOTALS**

**FORM CEC
COVER SHEET PG 2**

12 COMMITTEE NAME Fort Bend County Democratic Party (CEC)		13 FILER ID (Ethics Commission Filer) 00056261
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 29,202.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 48,868.42
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 12,621.98
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

April Jones

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - CEC**FORM CEC**
COVER SHEET PG 3
3 of 112

17 COMMITTEE NAME Fort Bend County Democratic Party (CEC)	18 Filer ID (Ethics Commission Filers) 00056261
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	
4. <input type="checkbox"/> SCHEDULE E: LOANS	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	
9. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
10. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	
SUBTOTAL AMOUNT	
\$ 29,202.00	
\$	
\$	
\$	
\$	
\$ 48,868.42	
\$	
\$	
\$	
\$	
\$	
\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/76 Rpt: 4/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 07/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahmed, Farha	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77479	
8 Principal occupation / Job title (See Instructions) Atty		9 Employer (See Instructions) Self
Date 08/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahmed, Farha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self employed
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahmed, Farha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Atty		Employer (See Instructions) Self
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahmed, Farha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Atty		Employer (See Instructions) Self
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahmed, Farha	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Atty		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/76 Rpt: 5/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahmed, Farha 6 Contributor address; City; State; Zip Code Sugar Land, TX 77479	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Atty		9 Employer (See Instructions) Self
Date 12/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahmed, Farha Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Atty		Employer (See Instructions) Self
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akhter, Sabrina Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akhter, Sabrina Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRD, PEARLIE (Ms.) Contributor address; City; State; Zip Code Missouri City, TX 77489	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attendance Clerk		Employer (See Instructions) FBISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/76 Rpt: 6/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 08/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRD, PEARLIE (Ms.)	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Missouri City, TX 77489	
8 Principal occupation / Job title (See Instructions) Attendance Clerk		9 Employer (See Instructions) FBISD
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRD, PEARLIE (Ms.)	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Missouri City, TX 77489	
Principal occupation / Job title (See Instructions) Attendance Clerk		Employer (See Instructions) FBISD
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRD, PEARLIE (Ms.)	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Missouri City, TX 77489	
Principal occupation / Job title (See Instructions) Attendance Clerk		Employer (See Instructions) FBISD
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRD, PEARLIE (Ms.)	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Missouri City, TX 77489	
Principal occupation / Job title (See Instructions) Attendance Clerk		Employer (See Instructions) FBISD
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYRD, PEARLIE (Ms.)	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Missouri City, TX 77489	
Principal occupation / Job title (See Instructions) Attendance Clerk		Employer (See Instructions) FBISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/76 Rpt: 7/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balasubramanian, Rama	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Missouri City, TX 77459	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaton, Douglas	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Director of operations		Employer (See Instructions) American Cargo Assurance, LLC
Date 08/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaton, Douglas (Mr.)	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Director of American Cargo Assurance LLC		Employer (See Instructions) American Cargo Assurance
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaton, Douglas (Mr.)	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Director of American Cargo Assurance LLC		Employer (See Instructions) American Cargo Assurance
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaton, Douglas (Mr.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Director of American Cargo Assurance LLC		Employer (See Instructions) American Cargo Assurance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/76 Rpt: 8/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaton, Douglas (Mr.)	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77498	
8 Principal occupation / Job title (See Instructions) Director of American Cargo Assurance LLC		9 Employer (See Instructions) American Cargo Assurance
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaton, Douglas (Mr.)	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Director of American Cargo Assurance LLC		Employer (See Instructions) American Cargo Assurance
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaton, Douglas (Mr.)	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Director of American Cargo Assurance LLC		Employer (See Instructions) American Cargo Assurance
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaton, Douglas (Mr.)	Amount of Contribution (\$) \$225.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Director of American Cargo Assurance LLC		Employer (See Instructions) American Cargo Assurance
Date 12/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaton, Douglas (Mr.)	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Director of American Cargo Assurance LLC		Employer (See Instructions) American Cargo Assurance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/76 Rpt: 9/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 10/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becerra, Christian	7 Amount of Contribution (\$) \$2,000.00
	6 Contributor address; City; State; Zip Code Richmond, TX 77406	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Becerra and Coigin PLLC
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bhasin, Archna (Ms.)	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Houston, TX 77083	
Principal occupation / Job title (See Instructions) Instructor		Employer (See Instructions) Wharton County Junior College
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bhasin, Archna (Ms.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77083	
Principal occupation / Job title (See Instructions) Instructor		Employer (See Instructions) Wharton College Jr. College
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bhasin, Archna (Ms.)	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Houston, TX 77083	
Principal occupation / Job title (See Instructions) Instructor		Employer (See Instructions) Wharton County Jr. College
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bhasin, Archna (Ms.)	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Houston, TX 77083	
Principal occupation / Job title (See Instructions) Instructor		Employer (See Instructions) Wharton Community Jr. College

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/76 Rpt: 10/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 12/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bhasin, Archna (Ms.)	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code Houston, TX 77083	
8 Principal occupation / Job title (See Instructions) Instructor		9 Employer (See Instructions) Wharton Community Jr. College
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Block, Nathan (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) BP
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Block, Nathan (Mr.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) BP
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Block, Nathan (Mr.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) BP
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Block, Nathan (Mr.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) BP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/76 Rpt: 11/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 07/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobbrick, Bill 6 Contributor address; City; State; Zip Code Sugar Land, TX 77478	7 Amount of Contribution (\$) \$20.00
	8 Principal occupation / Job title (See Instructions) Organizer	9 Employer (See Instructions) Fort Bend AFT
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobbrick, Bill Contributor address; City; State; Zip Code Sugar Land, TX 77478	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Organizer	Employer (See Instructions) Fort Bend AFT
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobbrick, Bill Contributor address; City; State; Zip Code Sugar Land, TX 77478	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Organizer	Employer (See Instructions) Fort Bend AFT
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobbrick, William Contributor address; City; State; Zip Code Sugar Land, TX 77487	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Supervisor	Employer (See Instructions) Ft Bend County
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobbrick, William Contributor address; City; State; Zip Code Sugar Land, TX 77487	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Supervisor	Employer (See Instructions) Ft Bend County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/76 Rpt: 12/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobbrick, William	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77487	
8 Principal occupation / Job title (See Instructions) Supervisor		9 Employer (See Instructions) Ft Bend County
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobbrick, William	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77487	
Principal occupation / Job title (See Instructions) Supervisor		Employer (See Instructions) Ft Bend County
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonner, Ferrel	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Fresno, TX 77545	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonner, Ferrel	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Fresno, TX 77545	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonner, Ferrel	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Fresno, TX 77545	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/76 Rpt: 13/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 10/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonner, Ferrel	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Fresno, TX 77545	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonner, Ferrel	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Fresno, TX 77545	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonner, Ferrel	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Fresno, TX 77545	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonner, Ferrel	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Fresno, TX 77545	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boykin, Frank&Becky	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/76 Rpt: 14/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 08/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boykin, Frank&Becky 6 Contributor address; City; State; Zip Code Sugar Land, TX 77498	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boykin, Frank&Becky Contributor address; City; State; Zip Code Sugar Land, TX 77498	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boykin, Frank&Becky Contributor address; City; State; Zip Code Sugar Land, TX 77498	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boykin, Frank&Becky Contributor address; City; State; Zip Code Sugar Land, TX 77498	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boykin, Frank&Becky Contributor address; City; State; Zip Code Sugar Land, TX 77498	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/76 Rpt: 15/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 12/29/2025	5 Full name of contributor Boykin, Frank&Becky Sugar Land, TX 77498	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/07/2025	Full name of contributor Bradshaw, Lyllyan Richmond, TX 77469	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/29/2025	Full name of contributor Burley, Vivian Missouri City, TX 77489	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/29/2025	Full name of contributor Burley, Vivian Missouri City, TX 77489	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2025	Full name of contributor Burley, Vivian Missouri City, TX 77489	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/76 Rpt: 16/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 07/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantu, Jennifer	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Richmond, TX 77469	
8 Principal occupation / Job title (See Instructions) Child Therapist		9 Employer (See Instructions) Non Profit
Date 08/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantu, Jennifer	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Child Therapist		Employer (See Instructions) Non Profit
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantu, Jennifer	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Child Therapist		Employer (See Instructions) Non Profit
Date 10/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantu, Jennifer	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Child Therapist		Employer (See Instructions) Non Profit
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantu, Jennifer	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Rosenberg, TX 77471	
Principal occupation / Job title (See Instructions) Child Therapist		Employer (See Instructions) Non Profit

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/76 Rpt: 17/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantu, Jennifer 6 Contributor address; City; State; Zip Code Rosenberg, TX 77471	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Child Therapist		9 Employer (See Instructions) Non Profit
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantu, Jennifer Contributor address; City; State; Zip Code Rosenberg, TX 77471	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Child Therapist		Employer (See Instructions) Non Profit
Date 10/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cherne, Justine (Mrs.) Contributor address; City; State; Zip Code Needville, TX 77461	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Legal Assistant		Employer (See Instructions) Allen Boone Humphries Robinson LLP
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clabough, Donald (Mr.) Contributor address; City; State; Zip Code Stafford, TX 77477	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clabough, Donald (Mr.) Contributor address; City; State; Zip Code Stafford, TX 77477	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/76 Rpt: 18/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 09/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clabough, Donald (Mr.)	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Stafford, TX 77477	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clabough, Donald (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Stafford, TX 77477	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clabough, Donald (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Stafford, TX 77477	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clabough, Donald (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Stafford, TX 77477	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crockett, Daisy (Miss)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/76 Rpt: 19/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 08/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crockett, Daisy (Miss)	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Richmond, TX 77469	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crockett, Daisy (Miss)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crockett, Daisy (Miss)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crockett, Daisy (Miss)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crockett, Daisy (Miss)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/76 Rpt: 20/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curimbaba, Sally 6 Contributor address; City; State; Zip Code Fulshear, TX 77441	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Small business owner		9 Employer (See Instructions) ASL International Inc
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, James Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) AIG
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, James Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) AIG
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devine, Lauren Contributor address; City; State; Zip Code Montgomery, TX 77316	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Director of Community Outreach		Employer (See Instructions) Keith Coleman Campaign, CDTX08
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DiPasquale, Elizabeth (Ms.) Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) School Psychologist		Employer (See Instructions) FBISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/76 Rpt: 21/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donald, Clabough (Mr.)	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Stafford, TX 77477	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donart, Colleen Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Merchandising		Employer (See Instructions) Sysco
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donart, Colleen Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Merchandising		Employer (See Instructions) Sysco
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donart, Colleen Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Merchandising		Employer (See Instructions) Sysco
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Echols, Brigitte Contributor address; City; State; Zip Code Needville, TX 77461	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/76 Rpt: 22/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 08/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Echols, Brigitte	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Needville, TX 77461	
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Echols, Brigitte	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Needville, TX 77461	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Donna (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Donna (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Donna (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/76 Rpt: 23/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Donna (Mrs.)	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77498	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Donna (Mrs.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Donna (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Donna (Mrs.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Donna (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/76 Rpt: 24/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 12/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Donna (Mrs.)	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77498	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Donna (Mrs.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estrada, Benjamin	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Stafford, TX 77477	
Principal occupation / Job title (See Instructions) Business System Analyst		Employer (See Instructions) Cash App - United States
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Cierra	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Richmond, TX 77407	
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Lamar LSD
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ghosh, Sumita	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Salazar Law Firm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/76 Rpt: 25/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 07/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ginyard, Cynthia	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77498	
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 08/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ginyard, Cynthia	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ginyard, Cynthia	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ginyard, Cynthia	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ginyard, Cynthia	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/76 Rpt: 26/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ginyard, Cynthia	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77498	
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ginyard, Cynthia	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ginyard, Cynthia	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glover, Tamecia	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77407	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Fort Bend County
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glover, Tamecia	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77407	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Fort Bend County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/76 Rpt: 27/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 09/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glover, Tamecia	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Richmond, TX 77407	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Fort Bend County
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glover, Tamecia	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77407	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Fort Bend County
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glover, Tamecia	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77407	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Fort Bend County
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glover, Tamecia	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77407	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Fort Bend County
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Joanne	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Clinical Pharmacist		Employer (See Instructions) CommonSpirit

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/76 Rpt: 28/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Rodney	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Missouri City, TX 77489	
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) not employed
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haleem, Shah (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Katy, TX 77494	
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions) SMZJ holdings
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haleem, Shah (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Katy, TX 77494	
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions) SMZJ holdings
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haleem, Shah (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Katy, TX 77494	
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions) SMZJ holdings
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haleem, Shah (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Katy, TX 77494	
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions) SMZJ holdings

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/76 Rpt: 29/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haleem, Shah (Mr.)	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Katy, TX 77494	
8 Principal occupation / Job title (See Instructions) Real estate		9 Employer (See Instructions) SMZJ holdings
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haleem, Shah (Mr.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Katy, TX 77494	
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions) SMZJ holdings
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansen, Paula	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hasanali, Ali	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sohail "Ali" Hasanali, Attorney at Law
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hasanali, Ali	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sohail "Ali" Hasanali, Attorney at Law

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 27/76 Rpt: 30/112
2 FILER NAME Fort Bend County Democratic Party (CEC)			3 Filer ID (Ethics Commission Filers) 00056261
4 Date 09/07/2025	5 Full name of contributor Hasanali, Ali	<input type="checkbox"/> out-of-state PAC (ID#: 6 Contributor address; City; State; Zip Code Sugar Land, TX 77479	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Sohail "Ali" Hasanali, Attorney at Law	
Date 10/07/2025	Full name of contributor Hasanali, Ali	<input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sohail "Ali" Hasanali, Attorney at Law	
Date 11/07/2025	Full name of contributor Hasanali, Ali	<input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sohail "Ali" Hasanali, Attorney at Law	
Date 12/07/2025	Full name of contributor Hasanali, Ali	<input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sohail "Ali" Hasanali, Attorney at Law	
Date 07/22/2025	Full name of contributor Hogg, Charles	<input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code Greensboro, TX 77441	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/76 Rpt: 31/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Charles 6 Contributor address; City; State; Zip Code Greensboro, TX 77441	7 Amount of Contribution (\$) \$25.00
	8 Principal occupation / Job title (See Instructions) Engineer	9 Employer (See Instructions) Self
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Charles Contributor address; City; State; Zip Code Greensboro, TX 77441	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Engineer	Employer (See Instructions) Self
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Charles Contributor address; City; State; Zip Code Greensboro, TX 77441	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Engineer	Employer (See Instructions) Self
Date 11/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Charles Contributor address; City; State; Zip Code Greensboro, TX 77441	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Engineer	Employer (See Instructions) Self
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Charles Contributor address; City; State; Zip Code Greensboro, TX 77441	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Engineer	Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/76 Rpt: 32/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 08/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins, Carolyn	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Missouri, TX 77459	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins, Carolyn	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Missouri, TX 77459	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins, Carolyn	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Missouri, TX 77459	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins, Carolyn	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Missouri, TX 77459	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Maria	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77027	
Principal occupation / Job title (See Instructions) Police Administrator		Employer (See Instructions) HPD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 30/76 Rpt: 33/112
2 FILER NAME Fort Bend County Democratic Party (CEC)			3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/06/2025	5 Full name of contributor Jacob, Bincy	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Pearland, TX 77581		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed	
Date 11/07/2025	Full name of contributor Jacob, Bincy	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Pearland, TX 77581		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed	
Date 11/07/2025	Full name of contributor Jacob, Bincy	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$65.00
	Contributor address; City; State; Zip Code Pearland, TX 77581		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed	
Date 07/21/2025	Full name of contributor Jacobs, Jennifer (Ms.)	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Houston, TX 77583		
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions) MUD #131	
Date 11/18/2025	Full name of contributor Jacobs, Jennifer (Ms.)	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Houston, TX 77583		
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions) MUD #131	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/76 Rpt: 34/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Regina	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Missouri City, TX 77459	
8 Principal occupation / Job title (See Instructions) Business Development		9 Employer (See Instructions) Australian Counsulate-General
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Regina	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459	
Principal occupation / Job title (See Instructions) Business Development		Employer (See Instructions) Australian Counsulate-General
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, April	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77083	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) AL Jones Contracting Consulting Services, LLC
Date 09/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, April	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77083	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) AL Jones Contracting Consulting Services, LLC
Date 10/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, April (Ms.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77083	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) AL Jones Contracting Consulting Services, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/76 Rpt: 35/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 10/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, April (Ms.)	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Houston, TX 77083	
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) AL Jones Contracting Consulting Services, LLC
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, April (Ms.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Houston, TX 77083	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) AL Jones Contracting Consulting Services, LLC
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, April (Ms.)	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code Houston, TX 77083	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) AL Jones Contracting Consulting Services, LLC
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, April (Ms.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Houston, TX 77083	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) AL Jones Contracting Consulting Services, LLC
Date 12/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, April (Ms.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77083	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) AL Jones Contracting Consulting Services, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/76 Rpt: 36/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Sharmia	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Richmond, TX 77407	
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Lexia Learning
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Soniah (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Missouri, TX 77459	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Soniah (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Missouri, TX 77459	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Soniah (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Missouri, TX 77459	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Soniah (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Missouri, TX 77459	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/76 Rpt: 37/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 10/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Jamie Kaye	7 Amount of Contribution (\$) \$70.00
	6 Contributor address; City; State; Zip Code Missouri City, TX 77459	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Jamie Jordan, PLLC
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Jamie Kaye	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jamie Jordan, PLLC
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Jamie Kaye	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jamie Jordan, PLLC
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Birdie (Miss)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Missouri, TX 77489	
Principal occupation / Job title (See Instructions) Community Liason- Borris Miles		Employer (See Instructions) Community Liason- Borris Miles
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Birdie (Miss)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Missouri, TX 77489	
Principal occupation / Job title (See Instructions) Community Liason- Borris Miles		Employer (See Instructions) Community Liason- Borris Miles

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/76 Rpt: 38/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 08/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Birdie (Ms.)	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Missouri City, TX 77489	
8 Principal occupation / Job title (See Instructions) Community Liaison		9 Employer (See Instructions) Borris Miles
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Birdie (Ms.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Missouri City, TX 77489	
Principal occupation / Job title (See Instructions) Community Liaison		Employer (See Instructions) Borris Miles
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Birdie (Ms.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Missouri City, TX 77489	
Principal occupation / Job title (See Instructions) Community Liaison		Employer (See Instructions) Borris Miles
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Birdie (Ms.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Missouri City, TX 77489	
Principal occupation / Job title (See Instructions) Community Liaison		Employer (See Instructions) Borris Miles
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Birdie (Ms.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Missouri City, TX 77489	
Principal occupation / Job title (See Instructions) Community Liaison		Employer (See Instructions) Borris Miles

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/76 Rpt: 39/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 12/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Birdie (Ms.)	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Missouri City, TX 77489	
8 Principal occupation / Job title (See Instructions) Community Liaison		9 Employer (See Instructions) Borris Miles
Date 07/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Shahadat-Nishan (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Shahadat-Nishan (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed
Date 09/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Shahadat-Nishan (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Shahadat-Nishan (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/76 Rpt: 40/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Shahadat-Nishan (Mr.)	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77498	
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Self Employed
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Shapnik	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77407	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Shapnik	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77407	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Shapnik	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77407	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Shapnik (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77407	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/76 Rpt: 41/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Shapnik (Mr.)	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Houston, TX 77407	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinard, Brandon	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Katy, TX 77494	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Mostyn Law Firm
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacsamana, Anthony	Amount of Contribution (\$) \$170.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larsen, Chelsea	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Energy
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LeBlanc, Paul (Mr.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/76 Rpt: 42/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Chung (Mr.)	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Katy, TX 77494	
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) C Y Lee Legal Group
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lykoudis, Anna	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mamora, Maria	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Richmond, TX 77406	
Principal occupation / Job title (See Instructions) Project Coordinator		Employer (See Instructions) W-Industries
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mansoor, Nabila	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Emgage
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mansoor, Nabila	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Emgage

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/76 Rpt: 43/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 07/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcantel, Jonathan 6 Contributor address; City; State; Zip Code Meadows Place, TX 77477	7 Amount of Contribution (\$) \$20.00
	8 Principal occupation / Job title (See Instructions) Not Employed	9 Employer (See Instructions) Not Employed
Date 08/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcantel, Jonathan Contributor address; City; State; Zip Code Meadows Place, TX 77477	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcantel, Jonathan Contributor address; City; State; Zip Code Meadows Place, TX 77477	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcantel, Jonathan Contributor address; City; State; Zip Code Meadows Place, TX 77477	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcantel, Jonathan Contributor address; City; State; Zip Code Meadows Place, TX 77477	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/76 Rpt: 44/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcantel, Jonathan	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Meadows Place, TX 77477	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcantel, Jonathan	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Meadows Place, TX 77477	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markowitz, Eliz (Miss)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Katy, TX 77494	
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) UH
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Barbara	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Sugarland, TX 77479	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Barbara	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Sugarland, TX 77479	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/76 Rpt: 45/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Barbara	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Sugarland, TX 77479	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Barbara	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Sugarland, TX 77479	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Barbara	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Sugarland, TX 77479	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maschek, David	Amount of Contribution (\$) \$240.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCollum, Tyra	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Fulshear, TX 77423	
Principal occupation / Job title (See Instructions) Assistant DA		Employer (See Instructions) Ft. Bend County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/76 Rpt: 46/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCorr, Larreishia	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Houston, TX 77033	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKee, Kenneth	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Pearland, TX 77584	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKee, Kenneth	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Pearland, TX 77584	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKee, Kenneth	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Pearland, TX 77584	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKee, Kenneth	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Pearland, TX 77584	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/76 Rpt: 47/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 10/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKee, Kenneth 6 Contributor address; City; State; Zip Code Pearland, TX 77584	7 Amount of Contribution (\$) \$25.00
	8 Principal occupation / Job title (See Instructions) Not employed	9 Employer (See Instructions) Not employed
Date 11/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKee, Kenneth Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Not employed	Employer (See Instructions) Not employed
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKee, Kenneth Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Not employed	Employer (See Instructions) Not employed
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Middleton, Brian Contributor address; City; State; Zip Code Houston, TX 77074	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions) Attorney	Employer (See Instructions) Middleton Law Firm PLLC
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Middleton, Coretta Contributor address; City; State; Zip Code Freno, TX 77545	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Administrator Coordinator	Employer (See Instructions) Ft. Bend County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/76 Rpt: 48/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 10/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Kali	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Missouri City, TX 77459	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) State of Texas
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Leslie	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459	
Principal occupation / Job title (See Instructions) Volunteer		Employer (See Instructions) Moms Demand Action
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Leslie	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459	
Principal occupation / Job title (See Instructions) Volunteer		Employer (See Instructions) Moms Demand Action
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Leslie	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459	
Principal occupation / Job title (See Instructions) Volunteer		Employer (See Instructions) Moms Demand Action
Date 12/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Leslie	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459	
Principal occupation / Job title (See Instructions) Volunteer		Employer (See Instructions) Moms Demand Action

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/76 Rpt: 49/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 12/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Leslie	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Missouri City, TX 77459	
8 Principal occupation / Job title (See Instructions) Volunteer		9 Employer (See Instructions) Moms Demand Action
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mundorff, Eileen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mundorff, Eileen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mundorff, Eileen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 07/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mundorff, Jan and Eileen (Miss)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/76 Rpt: 50/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 08/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mundorff, Jan and Eileen (Miss)	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Richmond, TX 77469	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mundorff, Jan and Eileen (Miss)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nivens, Wayne	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nivens, Wayne (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nivens, Wayne (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 48/76 Rpt: 51/112
2 FILER NAME Fort Bend County Democratic Party (CEC)			3 Filer ID (Ethics Commission Filers) 00056261
4 Date 10/12/2025	5 Full name of contributor Nivens, Wayne (Mr.)	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Richmond, TX 77469		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed	
Date 11/12/2025	Full name of contributor Nivens, Wayne (Mr.)	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77469		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed	
Date 12/12/2025	Full name of contributor Nivens, Wayne (Mr.)	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77469		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed	
Date 07/15/2025	Full name of contributor POTDAR, VASANTH	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Richmond, TX 77407		
Principal occupation / Job title (See Instructions) Computer Professional		Employer (See Instructions) GE	
Date 08/15/2025	Full name of contributor POTDAR, VASANTH	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Richmond, TX 77407		
Principal occupation / Job title (See Instructions) Computer Professional		Employer (See Instructions) GE	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/76 Rpt: 52/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POTDAR, VASANTH 6 Contributor address; City; State; Zip Code Richmond, TX 77407	7 Amount of Contribution (\$) \$1.00
	8 Principal occupation / Job title (See Instructions) Computer Professional	9 Employer (See Instructions) GE
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POTDAR, VASANTH Contributor address; City; State; Zip Code Richmond, TX 77407	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) Computer Professional	Employer (See Instructions) GE
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POTDAR, VASANTH Contributor address; City; State; Zip Code Richmond, TX 77407	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) Computer Professional	Employer (See Instructions) GE
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POTDAR, VASANTH Contributor address; City; State; Zip Code Richmond, TX 77407	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) Computer Professional	Employer (See Instructions) GE
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Teion (Mr.) Contributor address; City; State; Zip Code Richmond, TX 77469	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Director of Provider Services- Fairmont Hospice	Employer (See Instructions) Director of Provider Services- Fairmont Hospice

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/76 Rpt: 53/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Teion (Mr.)	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Richmond, TX 77469	
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) Director of Provider Services- Fairmont Hospice
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Teion (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Director of Provider Services- Fairmont Hospice
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Teion (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Director of Provider Services- Fairmont Hospice
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pasak, Rosalyn (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Richmond, TX 77406	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pasak, Rosalyn (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Richmond, TX 77406	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/76 Rpt: 54/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pasak, Rosalyn (Ms.)	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Richmond, TX 77406	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pasak, Rosalyn (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Richmond, TX 77406	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pasak, Rosalyn (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Richmond, TX 77406	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pasak, Rosalyn (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Richmond, TX 77406	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennell, Stephanie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Firm Administrator		Employer (See Instructions) Pennell Law Firm PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/76 Rpt: 55/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 08/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennell, Stephanie	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77479	
8 Principal occupation / Job title (See Instructions) Firm Administrator		9 Employer (See Instructions) Pennell Law Firm PLLC
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennell, Stephanie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Firm Administrator		Employer (See Instructions) Pennell Law Firm PLLC
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennell, Stephanie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Firm Administrator		Employer (See Instructions) Pennell Law Firm PLLC
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennell, Stephanie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Firm Administrator		Employer (See Instructions) Pennell Law Firm PLLC
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennell, Stephanie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Firm Administrator		Employer (See Instructions) Pennell Law Firm PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/76 Rpt: 56/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pino, Chris	7 Amount of Contribution (\$) \$265.00
	6 Contributor address; City; State; Zip Code Houston, TX 77006	
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Baker Ripley
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poole, Carolyn	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77053	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poole, Carolyn	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77053	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prestage, James "Grady" (Mr.)	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459	
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Fort Bend County
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prestage, James "Grady" (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459	
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Fort Bend County

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/76 Rpt: 57/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 10/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Qadri, Hina	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Missouri City, TX 77459	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, Val (Miss)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Sugar land, TX 77479	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self employed
Date 08/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, Val (Miss)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Sugar land, TX 77479	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self employed
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, Val (Miss)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Sugar land, TX 77479	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self employed
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, Val (Miss)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Sugar land, TX 77479	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/76 Rpt: 58/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, Val (Miss)	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Sugar land, TX 77479	
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Self employed
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, Val (Miss)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Sugar land, TX 77479	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self employed
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raffoul, Paul	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Richmond, TX 77407	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raffoul, Paul	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Richmond, TX 77407	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raffoul, Paul	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Richmond, TX 77407	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/76 Rpt: 59/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 09/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rash, Sonia 6 Contributor address; City; State; Zip Code Sugar Land, TX 77479	7 Amount of Contribution (\$) \$25.00
	8 Principal occupation / Job title (See Instructions) Lawyer/Judge	9 Employer (See Instructions) FB
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rash, Sonia Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Lawyer/Judge	Employer (See Instructions) FB
Date 11/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rash, Sonia Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Lawyer/Judge	Employer (See Instructions) FB
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rash, Sonia Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Lawyer/Judge	Employer (See Instructions) FB
Date 08/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.) Contributor address; City; State; Zip Code Sugar Land, TX 77498	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) President	Employer (See Instructions) muhammadmustafarashid ltd co.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/76 Rpt: 60/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 08/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77498	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) muhammadmustafarashid ltd co.
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/76 Rpt: 61/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 08/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77498	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) muhammadmustafarashid ltd co.
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) President
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/76 Rpt: 62/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 09/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77498	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) muhammadmustafarashid ltd co.
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.
Date 09/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/76 Rpt: 63/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 09/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77498	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) muhammadmustafarashid ltd co.
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.
Date 09/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/76 Rpt: 64/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 09/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77498	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) muhammadmustafarashid ltd co.
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions)
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/76 Rpt: 65/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 09/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77498	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) muhammadmustafarashid ltd co
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/76 Rpt: 66/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77498	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) muhammadmustafarashid ltd co.
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rashid, Muhammad (Mr.)	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/76 Rpt: 67/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 10/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rawlings, Monica 6 Contributor address; City; State; Zip Code Richmond, TX 77469	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Fort Bend County
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Ronique Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Self employed
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rupani, Rahim Contributor address; City; State; Zip Code Richmond, TX 77407	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Aloft Katy
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Dylan Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hoover Slovacek LLP
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Dylan Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hoover Slovacek LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/76 Rpt: 68/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 09/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Dylan	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Missouri City, TX 77459	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Hoover Slovacek LLP
Date 10/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Dylan	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hoover Slovacek LLP
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Dylan	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hoover Slovacek LLP
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Dylan	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hoover Slovacek LLP
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Dylan	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hoover Slovacek LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/76 Rpt: 69/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 12/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Dylan 6 Contributor address; City; State; Zip Code Missouri City, TX 77459	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Hoover Slovacek LLP
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sajjad, Eddie Contributor address; City; State; Zip Code Missouri city, TX 77459	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Innovative Solutions IT
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Charles (Mr.) Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Director Business Development		Employer (See Instructions) Air Liquide Large Industries
Date 08/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Charles (Mr.) Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Director Business Development		Employer (See Instructions) Air Liquide Large Industries
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Charles (Mr.) Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Director Business Development		Employer (See Instructions) Air Liquide Large Industries

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/76 Rpt: 70/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 10/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Charles (Mr.)	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77479	
8 Principal occupation / Job title (See Instructions) Director Business Development		9 Employer (See Instructions) Air Liquide Large Industries
Date 11/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Charles (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Director Business Development		Employer (See Instructions) Air Liquide Large Industries
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Charles (Mr.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Director Business Development		Employer (See Instructions) Air Liquide Large Industries
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scoggins, Meghan Brown (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Richmond, TX 77406	
Principal occupation / Job title (See Instructions) Mortgage Broker		Employer (See Instructions) Lonestar Premier Mortgage
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shah, Rashmi K.	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/76 Rpt: 71/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 10/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheikh, Sofia	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77479	
8 Principal occupation / Job title (See Instructions) controller		9 Employer (See Instructions) Avensis Energy Services
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shike, Nabil	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Richmond, TX 77407	
Principal occupation / Job title (See Instructions) Constable		Employer (See Instructions) Ft Bend County
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Bridgette	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas DFPS
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Bridgette	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas DFPS
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Bridgette	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas DFPS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/76 Rpt: 72/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Bridgette	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Richmond, TX 77469	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Texas DFPS
Date 09/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Bridgette (Miss)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas DFPS
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Bridgette (Miss)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas DFPS
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Keisha	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77083	
Principal occupation / Job title (See Instructions) Chief Deputy		Employer (See Instructions) Ft. Bend County
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Keisha	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77083	
Principal occupation / Job title (See Instructions) Chief Deputy		Employer (See Instructions) Ft. Bend County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/76 Rpt: 73/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Keisha	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Houston, TX 77083	
8 Principal occupation / Job title (See Instructions) Chief Deputy		9 Employer (See Instructions) Ft. Bend County
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Srinivasan, Padma	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) not employed
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stovring, Katherine	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Katy, TX 77450	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton-Bryant, Monica	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77083	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tankard, Ted (Mr.)	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/76 Rpt: 74/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 09/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tankard, Ted (Mr.)	7 Amount of Contribution (\$) \$125.00
	6 Contributor address; City; State; Zip Code Richmond, TX 77469	
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tankard, Ted (Mr.)	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tankard, Ted (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tankard, Ted (Mr.)	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tankard, Ted (Mr.)	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/76 Rpt: 75/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 12/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tankard, Ted (Mr.)	7 Amount of Contribution (\$) \$125.00
	6 Contributor address; City; State; Zip Code Richmond, TX 77469	
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Holly	Amount of Contribution (\$) \$115.00
	Contributor address; City; State; Zip Code Austin, TX 78705	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Travis County
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tuo, Ruei (Ms.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Katy, TX 77450	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tuo, Ruei (Ms.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Katy, TX 77450	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tuo, Ruei (Ms.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Katy, TX 77450	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/76 Rpt: 76/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 12/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tuo, Ruei (Ms.)	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Katy, TX 77450	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verma, Amarjit	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vohra, Muzaffar	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77478	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Business Mobil Evolution
Date 11/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Toni	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Richmond, TX 77406	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Fort Bend County
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washington, Vonda	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Missouri City, TX 77489	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/76 Rpt: 77/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wasim, Jazar	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77498	
8 Principal occupation / Job title (See Instructions) Business Banker		9 Employer (See Instructions) Zions
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Judge Teana	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Stafford, TX 77477	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Fort Bend County
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Linda	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77406	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Linda	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77406	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Linda	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77406	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/76 Rpt: 78/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 10/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Linda (Miss)	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Richmond, TX 77046	
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Linda (Miss)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77046	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Linda (Miss)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Richmond, TX 77046	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yousuf, Zaynah	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77083	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) IZY Consultants, LLC
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yousuf, Zaynah	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77083	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) IZY Consultants, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/76 Rpt: 79/112
2 FILER NAME Fort Bend County Democratic Party (CEC)		3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yousuf, Zaynah 6 Contributor address; City; State; Zip Code Houston, TX 77083	7 Amount of Contribution (\$) \$10.00
	8 Principal occupation / Job title (See Instructions) Consultant	9 Employer (See Instructions) IZY Consultants, LLC
Date 12/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yousuf, Zaynah Contributor address; City; State; Zip Code Houston, TX 77083	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Consultant	Employer (See Instructions) IZY Consultants, LLC
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) block, nathan Contributor address; City; State; Zip Code sugar land, TX 77479	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) attorney	Employer (See Instructions) BP
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) block, nathan Contributor address; City; State; Zip Code sugar land, TX 77479	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) attorney	Employer (See Instructions) BP
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) block, nathan Contributor address; City; State; Zip Code sugar land, TX 77479	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) attorney	Employer (See Instructions) BP

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/33 Rpt: 80/112	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/07/2025	5 Payee name FBCDP	
6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 13515 SW Frwy. Sugar Land, TX 77478	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FBCDP petty cash for Gala.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/26/2025	Payee name Fort Bend County Fair	
Amount (\$) \$305.00	Payee address; City; State; Zip Code 4310 Hwy 36 Rosenberg, TX 77471	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FBCDP Booth - Voting campaign.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/21/2025	Payee name 1-800 Flowers	
Amount (\$) \$155.82	Payee address; City; State; Zip Code 4600 Smith Street Houston, TX 77498	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FBCDP funeral - Precinct Chair.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/33 Rpt: 81/112	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/03/2025	5 Payee name Amazon	
6 Amount (\$) \$28.00	7 Payee address; City; State; Zip Code 410 Terry Ave. N Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event expenses, bags, candy.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/03/2025	Payee name Amazon	
Amount (\$) \$7.43	Payee address; City; State; Zip Code 410 Terry Ave. N Seattle, WA 98109	
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 Food expense.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/03/2025	Payee name Amazon	
Amount (\$) \$174.82	Payee address; City; State; Zip Code 410 Terry Ave. N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) FBCDP Gala expenses.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gala expenses.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/33 Rpt: 82/112	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/06/2025	5 Payee name Amazon	
6 Amount (\$) \$29.74	7 Payee address; City; State; Zip Code 410 Terry Ave. N Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FBCDP Gala expense.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/03/2025	Payee name Amazon	
Amount (\$) \$169.98	Payee address; City; State; Zip Code 410 Terry Ave. N Seattle, WA 98109	
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 Amazon bill.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/08/2025	Payee name Amazon	
Amount (\$) \$75.19	Payee address; City; State; Zip Code 410 Terry Ave. N Seattle, WA 98109	
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 Amazon bill
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/33 Rpt: 83/112	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 08/29/2025	5 Payee name Amegy Bank	
6 Amount (\$) \$15.00	7 Payee address; City; State; Zip Code P. O. Box 27459 Houston, TX 77227	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Amegy bank monthly service charge.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/30/2025	Payee name Amegy Bank	
Amount (\$) \$15.00	Payee address; City; State; Zip Code P. O. Box 27459 Houston, TX 77227	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank monthly service fee.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/31/2025	Payee name Amegy Bank	
Amount (\$) \$15.00	Payee address; City; State; Zip Code P. O. Box 27459 Houston, TX 77227	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Amegy monthly service charge.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/33 Rpt: 84/112	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/07/2025	5 Payee name Amegy Bank	
6 Amount (\$) \$6.00	7 Payee address; City; State; Zip Code P. O. Box 27459 Houston, TX 77227	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Amegy Bank check printing fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/01/2025	Payee name Amegy Bank	
Amount (\$) \$4.00	Payee address; City; State; Zip Code P. O. Box 27459 Houston, TX 77227	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Amegy printing fee.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/11/2025	Payee name Amegy Bank	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code P. O. Box 27459 Houston, TX 77227	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Check #9052
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/33 Rpt: 85/112	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 12/11/2025	5 Payee name Amegy Bank	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code P. O. Box 27459 Houston, TX 77227	
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 Check #9051
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/11/2025	Payee name Amegy Bank	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P. O. Box 27459 Houston, TX 77227	
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 Check #9050
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/16/2025	Payee name Amegy Bank	
Amount (\$) \$1,250.00	Payee address; City; State; Zip Code P. O. Box 27459 Houston, TX 77227	
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 Deposited check returned.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/33 Rpt: 86/112	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 12/30/2025	5 Payee name Amegy Bank	
6 Amount (\$) \$1,000.00	7 Payee address; City; P. O. Box 27459 Houston, TX 77227	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Check #9500
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Berry Hill Restaurant	Office sought Office held
Date 11/28/2025	Payee name Berry Hill Restaurant	
Amount (\$) \$62.35	Payee address; City; 13703 Southwest Fwy. Sugar Land, TX 77478	
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 Lunch for HQ volunteers.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burley, Vivian (Ms.)	Office sought Office held
Date 09/22/2025	Payee name Burley, Vivian (Ms.)	
Amount (\$) \$350.00	Payee address; City; 1138 Mossridge Dr Missouri City, TX 77469	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FBCDP - Vivian Burley notarization of party Precinct Chair oaths, etc.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/33 Rpt: 87/112	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261	
4 Date 07/16/2025	5 Payee name Cantu, Jennifer (Ms.)		
6 Amount (\$) \$69.16	7 Payee address; City; 527 Jeff Davis Drive Richmond, TX 77469		
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 FBCDP Keys for HQ - Reimbursement to Jennifer Cantu.	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 08/01/2025	Payee name Comcast		
Amount (\$) \$616.00	Payee address; City; PO Box 60533 City of Industry, CA 91716-0533		
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 FBCDP Comcast Phone list	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 08/25/2025	Payee name Comcast		
Amount (\$) \$280.71	Payee address; City; PO Box 60533 City of Industry, CA 91716-0533		
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 FBCDP July cable bill.	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/33 Rpt: 88/112	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 09/17/2025	5 Payee name Comcast	
6 Amount (\$) \$119.66	7 Payee address; City; State; Zip Code PO Box 60533 City of Industry, CA 91716-0533	
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 FBCDP phone bill.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/24/2025	Payee name Comcast	
Amount (\$) \$107.53	Payee address; City; State; Zip Code PO Box 60533 City of Industry, CA 91716-0533	
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 FBCDP cable bill.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/24/2025	Payee name Comcast	
Amount (\$) \$48.58	Payee address; City; State; Zip Code PO Box 60533 City of Industry, CA 91716-0533	
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 FBCDP Cable service.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/10/2025	5 Payee name Comcast	
6 Amount (\$) \$63.04	7 Payee address; City; State; Zip Code PO Box 60533 City of Industry, CA 91716-0533	
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 Comcast bill.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/24/2025	Payee name Comcast	
Amount (\$) \$67.33	Payee address; City; State; Zip Code PO Box 60533 City of Industry, CA 91716-0533	
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 FBCDP cable bill.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/01/2025	Payee name Constant Contact	
Amount (\$) \$187.00	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Phone List	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phone list to send emails.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 08/20/2025	5 Payee name Constant Contact	
6 Amount (\$) \$119.39	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
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 FBCDP phone bill.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/02/2025	Payee name Constant Contact	
Amount (\$) \$187.00	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
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 FBCDP phone bill.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/22/2025	Payee name Constant Contact	
Amount (\$) \$170.56	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
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 FBCDP phone bill.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 10/20/2025	5 Payee name Constant Contact	
6 Amount (\$) \$170.56	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
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 FBCDP phone bill.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/20/2025	Payee name Constant Contact	
Amount (\$) \$170.56	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
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 Constant contact phone bill.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/10/2025	Payee name Cotton Hill LTD	
Amount (\$) \$4,000.00	Payee address; City; State; Zip Code 106 Eton Green Victoria, TX 77904	
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 July 2025 - Deposit & 1st months rent.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 08/06/2025	5 Payee name Cotton Hill LTD	
6 Amount (\$) \$10,000.00	7 Payee address; City; 106 Eton Green Victoria, TX 77904	
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 FBCDP HQ Rent paid from 8/1/25-12/31/2025.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/01/2025	Payee name Dell Computers	
Amount (\$) \$1,247.04	Payee address; City; 5305 South Rice Road. Houston, TX 77081	
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 Dell printer.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/15/2025	Payee name Dollar Tree	
Amount (\$) \$57.91	Payee address; City; 5425 Highway 6 Suite C800 Missouri City, TX 77459	
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 FBCDP expense for PCT 3, 4
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 09/29/2025	5 Payee name Elections Office	
6 Amount (\$) \$175.00	7 Payee address; City; State; Zip Code 2568 Snyder Street Houston, TX 77498	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Elections Law material	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FBCDP Elections Laws material purchased.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/25/2025	Payee name Extra Space Storage	
Amount (\$) \$183.00	Payee address; City; State; Zip Code 11347 Sugar Park Lane Sugar Land, TX 77478	
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 FBCDP storage space.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/26/2025	Payee name Extra Space Storage	
Amount (\$) \$183.00	Payee address; City; State; Zip Code 11347 Sugar Park Lane Sugar Land, TX 77478	
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 FBCDP storage.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 07/02/2025	5 Payee name HEB Food	
6 Amount (\$) \$276.30	7 Payee address; City; 19900 Southwest Fwy Sugar Land, TX 77479	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Listening Precinct 2
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/02/2025	Payee name HEB Food	
Amount (\$) \$69.96	Payee address; City; 19900 Southwest Fwy Sugar Land, TX 77479	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Listening Tour - PCT 2
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/07/2025	Payee name HEB Food	
Amount (\$) \$21.66	Payee address; City; 19900 Southwest Fwy Sugar Land, TX 77479	
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 Listening Tour PCT3
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261	
4 Date 07/17/2025	5 Payee name HEB Food		
6 Amount (\$) \$142.40	7 Payee address; City; State; Zip Code 19900 Southwest Fwy Sugar Land, TX 77479		
8 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 Listening Tour PCT 3	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 10/07/2025	Payee name Haleem, Shah		
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 7514 San Clemente Point CT Katy, TX 77494		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FBCDP reimbursement to securing event location, Safari Texas Ranch for fundraising Gala.	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 08/19/2025	Payee name Hello Flowers		
Amount (\$) \$141.70	Payee address; City; State; Zip Code 16543 Bissonnet Houston, TX 77456		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FBCDP memorial for Precinct Chair.	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1: Sch: 17/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261	
4 Date 09/03/2025	5 Payee name Home Depot		
6 Amount (\$) \$37.66	7 Payee address; City; 10419 Highway 6 South Sugar Land, TX 77498		
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 FBCDP office supplies.	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/29/2025	Payee name Hopkins Lawn Service		
Amount (\$) \$64.05	Payee address; City; 3732 Fishcreek Road Stow, OH 44224		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Disputed charge.	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Used Amegy credit card inadvertently. Charged reversed.	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/17/2025	Payee name HostPhenix		
Amount (\$) \$78.82	Payee address; City; 16523 Smith Stret Houston, TX 77498		
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 Domain registration for FBCDP website.	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 07/21/2025	5 Payee name HostPhenix	
6 Amount (\$) \$359.88	7 Payee address; City; State; Zip Code P.O. 4062 Houston, TX 37040	
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 FBCDP - new website installment payment.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/21/2025	Payee name HostPhenix	
Amount (\$) \$227.89	Payee address; City; State; Zip Code P.O. Box 4062 Houston, TX 37040	
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 FBCDP - Installment payment for new website.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/21/2025	Payee name HostPhenix	
Amount (\$) \$1,709.00	Payee address; City; State; Zip Code P.O. Box 4062 Clarksville, TX 37040	
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 FBCDP - website installment payment.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 07/21/2025	5 Payee name HostPhenix	
6 Amount (\$) \$136.70	7 Payee address; City; State; Zip Code P.O. Box 4062 Houston, TX 37040	
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 FBCDP - website installment payment.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/07/2025	Payee name HostPhenix	
Amount (\$) \$850.00	Payee address; City; State; Zip Code P.O Box 4062 Clarksville, TX 37040	
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 FBCDP website expense.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/20/2025	Payee name Kroger Fuel	
Amount (\$) \$27.47	Payee address; City; State; Zip Code 18901 University Blvd Sugar Land, TX 77479	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Chair travel in District.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261	
4 Date 11/06/2025	5 Payee name Lacsamana, Anthony		
6 Amount (\$) \$590.00	7 Payee address; City; 3107 Winchester Way Sugar Land, TX 77479		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement to Anthony Lacsamana - Provided T-shirt, etc., for fundraising Gala.	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 11/20/2025	Payee name Marcantel, Jonathon (Mr.)		
Amount (\$) \$361.89	Payee address; City; 11618 Brook Meadows Lane Meadows Place, TX 77477-1835		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement to Secretary, Jonathan Marcantel.	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 07/14/2025	Payee name Marcantel, Jonathon		
Amount (\$) \$442.58	Payee address; City; 11618 Brook Meadows Lane Meadows Place, TX 77477-1835		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FBCDP reimbursement expenses.	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 21/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/10/2025	5 Payee name Michaels Stores	
6 Amount (\$) \$38.39	7 Payee address; City; State; Zip Code 15385 Southwest Freeway Sugarland, TX 77478	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event expense refunded.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/23/2025	Payee name OFFICE DEPOT	
Amount (\$) \$29.84	Payee address; City; State; Zip Code 15375 Southwest Fwy SUGAR LAND, TX 77478	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FBCDP - Agenda, report and Logo.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/20/2025	Payee name OFFICE DEPOT	
Amount (\$) \$8.86	Payee address; City; State; Zip Code 15375 Southwest Fwy SUGAR LAND, TX 77478	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FBCDP meeting copies. Treasurer report, agenda, etc.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 09/17/2025	5 Payee name OFFICE DEPOT	
6 Amount (\$) \$24.63	7 Payee address; City; State; Zip Code 15375 Southwest Fwy SUGAR LAND, TX 77478	
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 FBCDP office supplies.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/17/2025	Payee name OFFICE DEPOT	
Amount (\$) \$48.14	Payee address; City; State; Zip Code 15375 Southwest Fwy SUGAR LAND, TX 77478	
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 FBCDP event.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/17/2025	Payee name OFFICE DEPOT	
Amount (\$) \$4.20	Payee address; City; State; Zip Code 15375 Southwest Fwy SUGAR LAND, TX 77478	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FBCDP miscellaneous expense.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 23/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 10/14/2025	5 Payee name OFFICE DEPOT	
6 Amount (\$) \$78.74	7 Payee address; City; State; Zip Code 15375 Southwest Fwy SUGAR LAND, TX 77478	
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 FBCDP supplies.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name OFFICE DEPOT	
Amount (\$) \$78.12	Payee address; City; State; Zip Code 15375 Southwest Fwy SUGAR LAND, TX 77478	
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 FBCDP supplies/food.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/15/2025	Payee name OFFICE DEPOT	
Amount (\$) \$51.29	Payee address; City; State; Zip Code 15375 Southwest Fwy SUGAR LAND, TX 77478	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FBCDP event expense.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 24/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 10/15/2025	5 Payee name OFFICE DEPOT	
6 Amount (\$) \$4.12	7 Payee address; City; State; Zip Code 15375 Southwest Fwy SUGAR LAND, TX 77478	
8 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 FBCDP expense.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/15/2025	Payee name OFFICE DEPOT	
Amount (\$) \$23.49	Payee address; City; State; Zip Code 15375 Southwest Fwy SUGAR LAND, TX 77478	
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 FBCDP expense.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/22/2025	Payee name OFFICE DEPOT	
Amount (\$) \$306.27	Payee address; City; State; Zip Code 15375 Southwest Fwy SUGAR LAND, TX 77478	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FBCDP expense.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 25/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 10/22/2025	5 Payee name OFFICE DEPOT	
6 Amount (\$) \$0.55	7 Payee address; City; 15375 Southwest Fwy SUGAR LAND, TX 77478	
8 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 FBCDP expense.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 11/17/2025	Payee name OFFICE DEPOT	
Amount (\$) \$7.62	Payee address; City; 15375 Southwest Fwy SUGAR LAND, TX 77478	
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 Printing items for FBCDP meeting.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 11/19/2025	Payee name OFFICE DEPOT	
Amount (\$) \$4.05	Payee address; City; 15375 Southwest Fwy SUGAR LAND, TX 77478	
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 Printing items for FBCDP meeting.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 26/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/28/2025	5 Payee name Pizza Hut	
6 Amount (\$) \$44.00	7 Payee address; City; State; Zip Code 1020 Eldridge Rd. Sugarland, TX 77478	
8 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 Lunch for volunteers
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/10/2025	Payee name Pronsite	
Amount (\$) \$723.95	Payee address; City; State; Zip Code 6850 SW freeway Houston, TX 77083	
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 HQ furniture.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/29/2025	Payee name Pronsite	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 6850 SW freeway Houston, TX 77083	
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 Website storage fee for July & August 2025.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 27/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 09/29/2025	5 Payee name Pronsite	
6 Amount (\$) \$150.00	7 Payee address; City; State; Zip Code 6850 SW freeway Houston, TX 77083	
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 Website storage fee for July & August.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/29/2025	Payee name Renaissance Hotel	
Amount (\$) \$28.98	Payee address; City; State; Zip Code 14035 Travis Street Austin, TX 73301	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FBCDP training lunch @ Renaissance hotel in Austin, TX.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/05/2025	Payee name Safari Texas Ranch	
Amount (\$) \$8,365.07	Payee address; City; State; Zip Code 11627 FM 1464 Richmond, TX 77407	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FBCDP fundraising Gala.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 28/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 07/02/2025	5 Payee name Sam's Club	
6 Amount (\$) \$39.90	7 Payee address; City; 351 Hwy 6 Sugar Land, TX 77478	
8 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 Listening Tour - PCT 2
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/08/2025	Payee name Sam's Club	
Amount (\$) \$24.64	Payee address; City; 351 Hwy 6 Sugar Land, TX 77478	
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 Listening Tour PCT 3
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/13/2025	Payee name Shell Oil	
Amount (\$) \$30.32	Payee address; City; 13435 University Blvd Sugarland, TX 77479	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FBCDP event for PCT 3..
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 29/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/10/2025	5 Payee name Shell Oil	
6 Amount (\$) \$35.42	7 Payee address; City; 13435 University Blvd Sugarland, TX 77479	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FBCDP Chair travel in District.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/10/2025	Payee name Shell Oil	
Amount (\$) \$38.01	Payee address; City; 13435 University Blvd Sugarland, TX 77479	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Chair, travel in District.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/24/2025	Payee name Shell Oil	
Amount (\$) \$35.44	Payee address; City; 13435 University Blvd Sugarland, TX 77479	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Chairwoman, travel in district.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 30/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 07/07/2025	5 Payee name T-Mobile	
6 Amount (\$) \$268.91	7 Payee address; City; State; Zip Code 6800 S. Texas 6 Suite B Houston, TX 77083	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office expense.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/14/2025	Payee name T-Mobile	
Amount (\$) \$152.38	Payee address; City; State; Zip Code 6800 S. Texas 6 Suite B Houston, TX 77083	
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 FBCDP phone bill.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/29/2025	Payee name T-Mobile	
Amount (\$) \$152.51	Payee address; City; State; Zip Code 6800 S. Texas 6 Suite B Houston, TX 77083	
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 FBCDP phone bill.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 31/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/06/2025	5 Payee name TGM Printing	
6 Amount (\$) \$319.34	7 Payee address; City; State; Zip Code 13910 Murphy Rd. Stafford, TX 77477	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TGM printing for fundraising Gala event.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/06/2025	Payee name TGM Printing	
Amount (\$) \$1,120.39	Payee address; City; State; Zip Code 13910 Murphy Rd. Stafford, TX 77477	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TGM printing for Fundraising Gala.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/10/2025	Payee name Vicky, Pink (Ms.)	
Amount (\$) \$450.00	Payee address; City; State; Zip Code P.O. Box 88146 Houston, TX 77288	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photographer, Vicky Pink provided photography for FBCDP Gala. Check 9012
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 32/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 07/07/2025	5 Payee name Walmart	
6 Amount (\$) \$63.87	7 Payee address; City; State; Zip Code 5501 Highway 6 Missouri City, TX 77459	
8 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 Listening Tour - PCT 2
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/26/2025	Payee name shell timewise	
Amount (\$) \$41.30	Payee address; City; State; Zip Code 13435 University Blvd Sugarland, TX 77479	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FBCDP travel in district for party business.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/21/2025	Payee name shell timewise	
Amount (\$) \$32.71	Payee address; City; State; Zip Code 13435 University Blvd Sugarland, TX 77479	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FBCDP travel/gas.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 33/33 Rpt:	2 FILER NAME Fort Bend County Democratic Party (CEC)	3 Filer ID (Ethics Commission Filers) 00056261
4 Date 11/03/2025	5 Payee name shell timewise	
6 Amount (\$) \$34.33	7 Payee address; City; 13435 University Blvd Sugarland, TX 77479	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas charges.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name shell timewise	
Amount (\$) \$34.32	Payee address; City; 13435 University Blvd Sugarland, TX 77479	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Chair - Travel in District.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held