

Official Public Records of Harris County Diane Trautman County Clerk

CNOFF

Campaign Finance Report



COUNTY CLERK
HARRIS COUNTY, TEXAS

FileNo:

202096

Received By Clerk:

1/15/2020

File Date:

January 15, 2020

Office:

Commissioner Pct. 3

Candidate:

Thibaut, Kristi

Treasurer:

Shaddix, James

Category:

Contributions And Expenditures

Delivered By:

Personal Appearance

Type:

COR

Harris County No Fee

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

-		1 Filer	ID (Ethics Commission Filers)	2 Total pages filed:
The C/OH Instruction G	uide explains how to complete this fo	orm. 20	1931)	33
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST		MI	OFFICE USE ONLY
NAME	MRS. KRIST	7.1		Date Received
	_	SAUT		
4 CANDIDATE/	ADDRESS / PO BOX; APT / SUITE #;	CITY;	STATE: ZIP CODE	
OFFICEHOLDER MAILING ADDRESS	819 Wade Ha	mpton	Dr.	
Change of Address	HOUSTON TX	770	24	
5 CANDIDATE/	AREA CODE PHONE NUMBER		EXTENSION	
OFFICEHOLDER PHONE	(281) 543-06	599	•	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER	MS/MRS/MR FIRST MR. JAME	- <	MI	Receipt # Amount \$
NAME	MR. JAME			Date Processed
	SHAT	DIX		Date Imaged
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);		CITY;	STATE; ZIP CODE
TREASURER ADDRESS	11920 N. Dune	He Dr.		
(Residence or Business)				
	HOUSTON, TX	17024		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (713) 385 - 79	21	EXTENSION '	
. DEDOOT TYPE				
9 REPORT TYPE	January 15 30th day	y before election	Runoff	15th day after campaign treasurer appointment (Officeholder Only)
	July 15 8th day	before election	Exceeded \$500 limit	Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year		Month	Day Year
JOVENED	08/01/20	19 THR	OUGH IL	/ 31/2019
11 ELECTION	ELECTION DATE	,	ELECTION TYP	E
	Month Day Year	Primary []	Runoff Other Description	
	03/03/20 0	General	Special	
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if know	
			Harris Cou	nty Commissioner
			Precinct	nty Commissioner
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	V	15 Filer	r ID (Ethics Commission Filers)	
16 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CAND	OTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES M IDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT TO NSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORM JRES.	HE CANDIDATE'S OR OFFICEHOLDER'S	
	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC	•		
·		COMMITTEE CAMPAIGN TREASURER NAME		
Additional Pages			AV "	
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS	PLEDG	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS, OR IBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED	\$ -0-	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 51,180	
EXPENDITURE TOTALS		POLITICAL EXPENDITURES OF \$100 OR LESS, SITEMIZED	\$ -0-	
	4. TOTAL	POLITICAL EXPENDITURES	\$ 4,536.12	
CONTRIBUTION BALANCE	Y000000.	POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY ORTING PERIOD	\$ 4,536.12 \$ 45,761.67	
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD •	\$ -0-	
18 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.				
The The				
		Signature of Candidate	or Officeholder	
AFFIX NOTARY STAMP / SEALABOVE				
Sworn to and subsc	_	by the said Kristi This bent	_, this the _ Jan Jan	
day of 15, 20, 20, to certify which, witness my hand and seal of office.				
PHONO PHAN OR LOW				
Signature of officer administering salts. Princer administering oath . Title of officer administering oath . Title of officer administering oath				

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME 20 Filer ID (Ethics Com		mmiss	ion Filers)
Krist: This bant	2019311		
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		*	50,930
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	250
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.
4. SCHEDULE E: LOANS		\$	0
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL C	CONTRIBUTIONS	\$	3,912.38
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	O
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	L CONTRIBUTIONS	\$	0
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL F	UNDS	\$	623.74
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO	A BUSINESS OF C/OH	\$	0
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL (CONTRIBUTIONS	\$	0
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIB	UTIONS RETURNED	\$	0

SCHEDULE A1

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
KRISTI THIBAUT	2019311
4 Date 5 Full name of contributor Out-of-state PAC (ID#:	7 Amount of contribution (\$)
11/22/ Brian Adams	#250
2019 6 Contributor address; City; State; Zip Code	.
718 Country Ln. Houston Ty 7702	-4
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	structions)
Business owner / self-employed self-e	~ployed
Date Full name of contributor □ out-of-state PAC (ID#:	Amount of contribution (\$)
12/9/ JOH AGUILLON	\$ 200
2019 Contributor address: City; State; Zip Code	
Contributor address; City; State: Zip Code 3112 Windsur 20, #A 356 AUSTING TX 7870 Principal occupation / Job title (See Instructions) Employer (See Instructions)	3
Principal occupation / Job title (See Instructions) Employer (See Instructions)	structions)
Sales Cactus	USA
Date Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
9/11/2019 Danielle Ahlrich	Amount of contribution (#)
Contributor address; City; State; Zip Code	* 150
9529 Colebrack St.	, 00
AUSTIN TX 78740	۲
Principal occupation / Job title (See Instructions) Employer (See In	4.1
Attorney Martens To	idd, Leonard & Ahlrich
Date Full name of contributorout-of-state PAC (ID#:) Amount of contribution (\$)
9/25/ Harriet Alexander Contributor address; City; State; Zip Code	\$ 100
2019 11110 Claymore Rd. Houston TX 7702	
1110001000 17	
Principal occupation / Job title (See Instructions) Employer (See In	
Honemaker Self-	employed
·	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Kristi Thibai 2019311 7 Amount of contribution (\$) 4 Date out-of-state PAC (ID#: Scott Anderson 11 7 \$250 6 Contributor address; City; State; Zip Code Houston TX 77056 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) President Anderson Oil Full name of contributor out-of-state PAC (ID#:_ Date Amount of contribution (\$) Craig Armstiang Contributor address; 8/28/ 10370 Richwood Ave. Houston TY 17042 Principal occupation / Job title (See Instructions) Employer (See Instructions) DDS Dentist Crain Armstron ut-of-state PAC (ID#: Date Full name of contributor Amount of contribution (\$) 12/5/ \$500 State; Zip Code Contributor address; 2019 C019~> 520 Start St. 78401 Christi Principal occupation / Job title (See Instructions) Employer (See Instructions) Acoek Engineering potreau Oil & Gas produces Date Full name of contributor Amount of contribution (\$) out-of-state PAC (ID#:_ Melanic Belt \$500 City; 7749 Escala Dr. TX 78735 Austin Principal occupation / Job title (See Instructions) Employer (See Instructions) ARC Thysician

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Kristi Thiba 2019311 4 Date out-of-state PAC (ID#: 7 Amount of contribution (\$) Mey Bissinger 6 Contributor address; 9/25/ #250 State; Zip Code 2019 704 Country Ln. 8 Principal occupation / Job title (See Instructions) self-employed Home maker Full name of contributor Date out-of-state PAC (ID# Amount of contribution (\$) 8/22/2019 Will Black Contributor address; 321 S. Washington St. \$ 1000 Alexandria Va 22103 | Employer (See Instructions) Principal occupation / Job title (See Instructions) President Oxford Communications Full name of contributor Date out-of-state PAC (ID#: Amount of contribution (\$) Joe Blasi 9/27/ \$250 Contributor address: City: State; Zip Code 2019 602 Flortdale Rd. Tx 77024 Employer (See Instructions) Principal occupation / Job title (See Instructions) McGrid, Scibels & Williams Executive VP Date Full name of contributor out-of-state PAC (ID# Amount of contribution (\$) Fred Bosse Contributor address; City; 13410 Holly Park Dr. State; Zip Code \$ 500 Houston Ty 77015 | Employer (See Instructions) Principal occupation / Job title (See Instructions) Self-employed Attorner ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
	Krist: Thibaut	2019311	
4 Date	5 Full name of contributor	7 Amount of contribution (\$)	
12/31	Allison Bowers		
2019	6 Contributor address; City; State; Zip Code	\$ 50	
	708 Upson St. Austin Ty 78703		
8 Principal occup	pation / Job title (See Instructions) 9 Employer (See Instruc	_	
A	Horney Hutcheson	Bowers, LLP	
Date /	Full name of contributor	Amount of contribution (\$)	
12/30/	Jennifer Brader		
2019	Contributor address; City; State; Zip Code	\$ 100	
	7211 Lake wood Dr. Austra TX 78750		
Principal occup	5 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	tions)	
	of Statt - State Rep. Reynolds State of	See Alleria	
	Ulati Ciair Ty. Reynow		
Date (Full name of contributor	Amount of contribution (\$)	
9/24/	J. Carter Breed		
2019	Contributor address; City; State; Zip Code	\$250	
~U[-]	11935 Homewood Ln. Howton Tx 77024		
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	•	
	President J. Carter B	iced Properties	
Date	Full name of contributor	Amount of contribution (\$)	
10/0/2			
10/8/2019	Contributor address; City; State; Zip Code	\$250	
	7505 Memorial woods		
	#2 Housting TX 77024		
_	pation / Job title (See Instructions) Employer (See Instruc		
Yrinci.	pal Partner, Innovatini Dev. BP Bilit.	<u>n</u>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME	Kristi Thibaut	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of contribution (\$)
9/25/	Minda Caesar	# - 50
2019	6 Contributor address; City; State; Zip Cod 11935 Broken Bough Houstan TX 7765	
8 Principal occup	pation / Job title (See Instructions) 9 Employer (See	Instructions)
	Homemaker Self-e	uplayed
Date	Full name of contributor	Amount of contribution (\$)
8/23/	Heather Canfield	#25
2019	Contributor address; City; State; Zip Coo	oz4
Principal occur	pation / Job title (See Instructions) Houst Ty 77	The state of the s
		ployed
Date	Full name of contributor	Amount of contribution (\$)
12/10/	Tosie Clinton Contributor address; City; State; Zip Cod	\$ 500
2019	1407 1 504	55
Principal occup	pation / Job title (See Instructions) Employer (See	Instructions)
	Sales Guard	1 Services
Date	Full name of contributor out-of-state_PAC (ID#:	Amount of contribution (\$)
9/24/	Julia Comiskey	# ₂₅₀
2019	8317 Cedar Spur Houston TX 770	
Principal occup	pation / Job title (See Instructions) Employer (See	e Instructions)
Chief]	Development Officer The W	Ioman's Home

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how t	to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME	1) 1 -+1-1 5	<u> </u>		3 Filer ID (Ethics Commission Filers)
	Kristi Thibas	<u>'\</u>		201931
4 Date	5 Full name of contributor	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
9/23/	Meaghan Conrad			<i>(</i> / <i>C</i> -
2019	6 Contributor address;	-	State; Zip Code	\$50
		Houston	TX 77055	
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	
	Honomaker		<u> </u>	uployed
Date	Full name of contributor	out-of-state PAC		Amount of contribution (\$)
12/20/	Ken Culbreth		State; Zip Code	#500
2019	239 Indiana Ave.	Corpus:	Tx 78404	
Principal occup	pation / Job title (See Instructions)	9-11-21-1	Employer (See Instruc	tions)
AHO	rney	_	The Culbre	th Law Firm
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
8/21/	Ann Cooper			\$ 25
2019	Contributor address; 14126 Hearth	City;	State; Zip Code	425
	Hullow Ln.	Houston	 ' ' ' ' ' ' ' ' '-	
. 1	pation / Job title (See Instructions)		Employer (See Instruc	1
Itomo	enaker	7-2-	Sclt-e	uplayed
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
12/3//	Jews: fer Da Contributor address;	City;	State; Zip Code	\$50
2019	450 Westminster	Heustan	7x 77024	
Principal occur	pation / Job title (See Instructions)	1700312	Employer (See Instruc	itions)
	memaker		self-emplo	
			0011 - 0-010	7-01
	•			
	•			
			•	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME	1/		3 Filer ID (Ethics Commission Filers)
	Krist: Thibaut		2019311
4 Date	5 Full name of contributor ut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
8/12/	June Deadrick		
151	6 Contributor address; City;	State; Zip Code	\$ 1000
2019	1701 Herman Dr. Houston	TX 77004	
	pation / Job title (See Instructions)	9 Employer (See Instruc	
Lo.	bby 7st	Centerpo	int Energy
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
9/25/	Kathy Deflenbach Contributor address; City;	State: Zie Code	#250
2019	-a D. I		
	laca karon Itoustan	74 77055	
	ation / Job title (See Instructions)	Employer (See Instruction	1
01	tia managet	Northston	re Builders
· Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
9/11/	Kim Deulin		
2019	Contributor address; City;	State; Zip Code	\$ 500
20.1	82 Fairview Place #5 Scaoliff	NY 11579	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	tions)
C 0V	sutant	Sclf-enp	loyed
Date	Full name of contributor uut-of-state PAC	(ID#:)	Amount of contribution (\$)
12/28/	Kin Deulin		# 500
2019	Contributor address; City;	State; Zip Code	7 500
	82 Fairview Place Scacliff	NY 11579	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	
Coh	sultant	sett-eup	loyed
			,

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME	/		3 Filer ID (Ethics Commission Filers)
	Kristi Thibaut		201931
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
11/22/	Kirk England		
2019	6 Contributor address; City;	State; Zip Code	\$500
	4242 S. Carrier Grand PRWY Prairie	TX 75052	
	pation / Job title (See Instructions)	9 Employer (See Instructi	l l
insur	ance agent	Self-emp	loyed
Date	S	(ID#:)	Amount of contribution (\$)
9/17/	Jennifer Espey		#
2019		State; . Zip Code	\$500
	11305 Iris Lec Ln. Houston	74 77024	COLI
Principal occup	eation / Job title (See Instructions)	Employer (See Instruct	i A
	Houcmaker	self-en	played
Date	Full name of contributor Out-of-state PAC	(ID#:)	Amount of contribution (\$)
12/17/	Jennifer Espey		
2	Contributor address; City;	State; Zip Code	\$ 1000
2015	11305 Iris Lee Ln. Heustr	74 7700	
Principal securi	pation / Job title (See Instructions)	Employer (See Instruct	ions)
, interpar occup			uployed
	Honemaker	3611-8	whichtar
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
12/31	Julie Estlinbaum	,	⊥tr.
2019	Contributor address; City;	State; Zip Code	#100
2011	P.O. Box 289 Bay City	Tx 77404	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
· · · · · ·	teacher	BCISD	
		<u> </u>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME	Kristi Thibat	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
11 13/	Cheryl Fleming 6 Contributor address; City; State; Zip Code	# 100
2019	7823 Shady Villa Cove Houstan TX 77055	4 100
8 Principal occur	pation / Job title (See Instructions) 9 Employer (See Instru	luctions)
	pital Administrator Menoria	, ',1
Date	Full name of contributor	Amount of contribution (\$)
	Russ Frank Contributor address; City; State; Zip Code	\$250
2019	Contributor address; City; State; Zip Code 1401 Calumet St. #.507 Houston TX 17004	
Principal occup	pation / Job title (See Instructions) Employer (See Instru	
VP, (Customer Services METRO	
Date	Full name of contributorout-of-state PAC (ID#:	Amount of contribution (\$)
11 [14]	Veranica Gonzales Contributor address; City; State; Zip Code	# 0 = 0
2019	Contributor address; City; State; Zip Code 605 Water Lily McAllen 7x 78504	\$ 250
Principal occup	pation / Job title (See Instructions) Employer (See Instru	uctions)
Govern	ment & Community Pelations UTRBV	
Date 12 30	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
2019	Contributor address; City; State; Zip Code	\$ 100
	1510 Pearson St. Howston TX 77023	
Principal occup	pation / Job title (See Instructions) Employer (See Instru	
Con	sultant self-e	flyed
		. 0
		·

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:		
2 FILER NAME	Kristi Thibat	3 Filer ID (Ethics Commission Filers)		
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)		
9/16/	Pan Goodson 6 Contributor address; City; State; Zip Code	#250		
2019	13703 Perthshire Rd Huston TX 77079	1		
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See Inst	tructions)		
	tomenaker self-c	cuplayed		
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)		
9/9/	Contributor address; City; State; Zip Code	#250		
2019	710 W. Creekside Dr. Houston Tx 77024			
Principal occup	pation / Job title (See Instructions) Employer (See Inst	tructions)		
	Homemaker Self-emp	loyed		
Date	Full name of contributor	Amount of contribution (\$)		
12/31/	Loicey Green	*/ 5		
2019	Contributor address; City; State; Zip Code 915 Kenforest Dr. Missouri City 77 77489	\$ 500		
Principal occup	pation / Job title (See Instructions) Employer (See Inst	tructions)		
	retired self-expl	aged		
Date .	Full name of contributor	Amount of contribution (\$)		
12/19/.	Jason Griffin			
2019	Contributor address; City; State; Zip Code	#500		
	8709 (charsput Houston TX 77055			
Principal occupation / Job title (See Instructions) Employer (See Instructions)				
Atto	rney Gritin	Law Firm		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME	Kristi Thibat		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC ((ID#·	7 Amount of contribution (\$)
9/27/	Lorena Guilanshah 6 Contributor address: City	State: Zin Code	\$50
2019	9243 Kenilworth St. Housta	7/ 77024	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
H	onemaker	self-enp	loyed
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of contribution (\$)
11/01	George Harrison		į
7 16	Contributor address; City;	State; Zip Code	\$500
2019	2486 CR 222 Buy City	TX 77414	,
Principal occur	pation / Job title (See Instructions)	Employer (See Instruc	tions)
Vice Y	resident	STPNO)C
Date 2 3	Full name of contributor out-of-state PAC Leif Hatlen Contributor address; City;	(ID#:) State; Zip Code	Amount of contribution (\$)
	13527 No. Tracewood Hours	to TX 77077	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	, ·
·	etired	Self-euf	loyed
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
10/12/	Chuck Herry Contributor address; City;		\$250
2019	6206 Valley forge Houston	TX 77057	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	ctions)
	Geologist	Mirador tv	rergia
			3

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME	Kristi Thibat		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor ut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
9-26-	Kim Hehman		\$ 500
2019	l	State; Zip Code	4380
	16506 Chalk Maple Houstn	TY 77095	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
	realtor_	Coupass	
Date	Full name of contributor	. 4///	Amount of contribution (\$)
12/12/	Mark Homer		
2019	Contributor address; City;	State; Zip Code	\$ 250
2011	5209 Eagle Trace Trl. Austin	Ty 78730	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	tions)
resta	wrant owner	isclf-en	placed
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
8/21/	Laura Horn		<u>.</u>
2019	Contributor address; City;	State; Zìp Code	\$100
2011	5 Oaklawn Dr. Howston	77024	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)_
	Honoraker	1	- self-employed
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
11/13/	San Houston		# 100
,	Contributor address; City;	State; Zip Code	4 100
2019	12 550 Cherry Creek Berd Lu. Horota	74 77041	
Principal occur	pation / Job title (See Instructions)	Employer (See Instruc	tions)
	torney	Scott, Clau	
	30		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME	Kristi Thibaut		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
2019	7703 Burn 1500	State; Zip Code	\$250
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
	Hondhaker	self-eup	loyed
Date	Full name of contributor out-of-state PAC	C (ID#:)	Amount of contribution (\$)
11/7/		State; Zip Code	#250
2019	1028 Winnie St. Galvest.	- 74 77550	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)
A t	torney	Jaworski	Law Firm
Date	Full name of contributor out-of-state PAC	(ID#:	Amount of contribution (\$)
9 13	Traci Jensen Contributor address; City;	State; Zip Code	\$ 250
2019	1424 Waverly St. Houst	~ 7× 77008	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)
	Honewaker	SeH-E	explayed
Date	Full name of contributor out-of-state_PAG	C (ID#:)	Amount of contribution (\$)
9/25/	Heidi Kirkpatriek Contributor address; City;	State; Zip Code	\$ 150
2019		~ Tx 77024	· On.
Principal occup	pation / Job title (See Instructions)	Employer (See Instruction 5 clf -cup)	etions)
	110mt m a poc	701(-22)	are a second
•			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:		
2 FILER NAME	Kristi Thibaut	3 Filer ID (Ethics Commission Filers)		
4 Date		7 Amount of contribution (\$)		
, 1	5 Full name of contributor	, Amount of Continuation (\$)		
12/30/	Jessica Leslic 6 Contributor address; City; State; Zip Code	\$250		
2019	110 Canyon Dr. San Autonio Ty 78209			
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See Instruc	tions)		
	retired self.	-enployed		
Date	Full name of contributor	Amount of contribution (\$)		
12/18/	Ray Lieudo			
ı	Contributor address; City; State; Zip Code	\$100		
2019	174 Travertne Trl. Buda TX 78610	,,,,,		
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	tions)		
	Director ONCOR			
Date	Full name of contributor	Amount of contribution (\$)		
12/12/	John Loedke			
2019	Contributor address; City; State; Zip Code	#100		
	850 Imperial Blud. Sugar TX 77498			
,	pation / Job title (See Instructions) Employer (See Instruc	i' l		
	self-e-played self-e.	-pleyed		
Date	Full name of contributor	Amount of contribution (\$)		
9/25/	Leisha Mumera Contributor address; City, State; Zip Code	\$ 500		
2019	10902 Little	<u> </u>		
Principal occupation / Job title (See Instructions) Employer (See Instructions)				
Principal occup		enplaced		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Krist: Thibai 2019311 7 Amount of contribution (\$) 4 Date out-of-state PAC (ID#: Poppie Massey 6 Contributor address: 11/21 4100 State; Zip Code 2019 3632 Inverness Dr. 8 Principal occupation / Job title (See Instructions) self-employed Honemaken Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) Patricia Mathis 6906 Blandford Lu. 77055 Employer (See Instructions) Principal occupation / Job title (See Instructions) self-employed retire d Full name of contributor Date ut-of-state PAC (ID# Amount of contribution (\$) Dudley McCalla Contributor address; 12/31 State; Zip Code 2019 Scenic Da 78703 Principal occupation / Job title (See Instructions) retired self-employed Date Full name of contributor out-of-state PAC (ID# Amount of contribution (\$) Team sters Contributor address; State; Zip Code \$10,000 City; 4303 N. San Houston Houston TY 72032 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

		·	
The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME	Kristi Thibat		3 Filer ID (Ethics Commission Filers)
4 Date			2019311
_	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of contribution (\$)
12/25/	Moses Merado 6 Contributor address; City;	State; Zip Code	#1000
2019	1313A Constitution Washington	Pc 20002- 9 Employer (See Instruc	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
AHO	rney	Olgiluy	
Date	Full name of contributor		Amount of contribution (\$)
10/4/	Oliver Middleton		\$, 75
2019	Contributor address; City; 5214 Brithage 11	State; Zip Code	\$ 675
2019	Jair Drittuore Houston	TX 77041	
	pation / Job title (See Instructions)	Employer (See Instruc	·
Sel	f-employed	Glass Bivel	ing company
Date	Full name of contributor		Amount of contribution (\$)
12/30	Ently Miller		4
2019	Contributor address: City: 707 Center Ave. Brownw	State: Zip Code ad Tx 76801	\$25O
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	tions)
P	Horney	self-eng	ployed
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
8/21/	Jehnifer Moss Contributor address; City;	States 7in Code	# 100
2019	Contributor address; City; 619 Shartle Cir Houst	State; Zip Code	700
Principal occur	pation / Job title (See Instructions)	Employer (See Instruc	itions)
	Honouster	self-emp	leved
		T	
	>		
*	·		
<u> </u>			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME	Kristi Thibat	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor Out-of-state PAC (ID#:)	7 Amount of contribution (\$)
9/11/	Brian Muecke	\$ 250
2019	6 Contributor address; City; State; Zip Code	4250
	811 Hedwig Way Houston TX 77024	
8 Principal occup	pation / Job title (See Instructions)	itions)
	executive Intrinsic	
Date (Full name of contributor	Amount of contribution (\$)
8/21/	Keir Muray	\$ 5
2019	Contributor address; City; State; Zip Code 3523 Bradford Hustin TY 77025	7 5
	7127 Mag 10101 14051.2 17 71825	
• •	eation / Job title (See Instructions)	
	consultant -Se	elf-employed
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
8/24/		\$100
2019	Contributor address; City; State; Zip Code	4 100
	29 Quadrangle Lardo Tx 78041	
	pation / Job title (See Instructions) Employer (See Instruc	
3	dministration Texas A&A	1 International
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
9/24/	Leolic Parkan Contributor address; City; State; Zip Code	#250
2019	7703 Edgenay Dr. Herstar Ty 17656	,
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	tions)
VP,	Accounting Memorial H	trman

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME	Krist: Thibat		3 Filer ID (Ethics Commission Filers)
4 Date 9 25 / 2019	5 Full name of contributor out-of-state PAC Karen Peck Gentributor address; City; 12415 Broken Arion St. Hend	State; Zip Code	7 Amount of contribution (\$)
		9 Employer (See Instruct	
Date 別ない	Full name of contributor ut-of-state PAC	(ID#:)	Amount of contribution (\$)
2019	Contributor address; City; 4545 Ceck Rd Houston	State; Zip Code	\$ 50
Principal occup	nation / Job title (See Instructions)	Employer (See Instruct	
Date 12 17 2019	Full name of contributor out-of-state PAC Jimmy Reedle Contributor address; City; 3405 Mendow Lake La. Howsta	State; Zip Code	Amount of contribution (\$)
Principal occup	Dation / Job title (See Instructions)	Employer (See Instruct	Day
Date IZ (30) 2019 Principal occup	Full name of contributor out-of-state PAC Barbara Robbins - Friedma Contributor address; City; 204 Travis St. #5D Houst Dation / Job title (See Instructions) Film moken	State; Zip Code	
	,		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete thi	s form.	1 Total pages Schedule A1:
2 FILER NAME	Krist: Thibaut		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state_PA	AC (ID#;)	7 Amount of contribution (\$)
12/30	Stave Rosenceauz 6 Contributor address; City;		#100
2019	6 Contributor address; City; 6 Sleep Oales Cir. Howth	14 77024	
•	pation / Job title (See Instructions)	9 Employer (See Instruc	otions)
	ctired	Self-en	played
Date	Full name of contributor		Amount of contribution (\$)
8/21/	Marissa Schlaifer	_	various of contribution (c)
2019	Contributor address; City;	State; Zip Code	#100
	1050 N. Stuart St. #400 Ark	ington VA 2220	1
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	ctions)
heal	th policy	OPTUMRY	
Date	Full name of contributor	AC (ID#:)	Amount of contribution (\$)
9/26/	Cristina Secrest		,
2019	Contributor address; City;	State; Zip Code	#1000
	2146 Stanmore Heist	m Tx 77019	
Principal occu	pation / Job title (See Instructions)	Employer (See Instru	ctions)
	Consultant	εY	
Date .	Full name of contributor out-of-state PA	AC (ID#:)	Amount of contribution (\$)
8/30/	James Shaddiy		
2019	Contributor address; City;	State; Zip Code	#250
	11920 N. Durrette Housts	~ Ty 77024	
Principal occu	pation / Job title (See Instructions)	Employer (See Instru	ctions)
	retired	self-emp	loyed
		1	0
4			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME	Kristi Thibat	3 Filer ID (Ethics Commission Filers)
4 Date		
4	5 Full name of contributor	7 Amount of contribution (\$)
, ,	James Shaddiy 6 Contributor address; City; State; Zip Code	\$2500
2019	11920 N. Durrelle Huston Ty 77024	
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See Instruc	tions)
-	ictired self-eng	sloyed
Date	Full name of contributor	Amount of contribution (\$)
8/21	Allison Stiva	
2019	Contributor address; City; State; Zip Code	\$100
2019	42 Valhalla Bay City Ty 771114	
	pation / Job title (See Instructions) Employer (See Instruc	tions)
Chiet	Foreighting officer BCISP	
Date	Full name of contributor	Amount of contribution (\$)
12/30	Allisan Sliva	
	Contributor address; City; State; Zip Code	\$ 100
2019	42 Valhalla Bay City Tx 77414	
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	ctions)
Chief	Operating Officer BCISD	
Date	Full name of contributor	Amount of contribution (\$)
8/22/	Barbara Sliva	
2-19	Contributor address; City; State; Zip Code	\$100
	16 Valhalla Buy City Tx 77414	
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	ctions)
	retired self-en	ployed

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to co	omplete this form.	1 Total pages Schedule A1:
2 FILER NAME	Kristi Thibas	+ .	3 Filer ID (Ethics Commission Filers)
4 Date		out-of-state PAC (ID#:	2019311 7 Amount of contribution (\$)
11/14/	Barbara Slive		(4)
MILL ()	6 Contributor address;	City; State; Zip Code	\$500
2019	16 Valhalla	Bay City Tx 77414	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	i i
•	161116	self-en	-picy=0
Date	Λ .	out-of-state PAC (ID#:)	Amount of contribution (\$)
12/30/	Contributor address;	City; State; Zip Code	#100
2019		-	4100
		Bay City Tx 77414	
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	. A
	retired	self-emp	loyed
Date	Full name of contributor	out-of-state PAC (ID#)	Amount of contribution (\$)
9/20/	Todd Smith		\$ 200
2019		City; State; Zip Code	4 200
		Bedford TX 76022	
, ,	pation / Job title (See Instructions)	Employer (See Instruc	· A
	Horney	3elf-emplo	4601
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of contribution (\$)
ll (c)	Loy Sneary Contributor address;		#500
2019		ay City Tx 77414	
		<u> </u>	
Principal occuj	Sclf cuol	Employer (See Instruction Self-em	
	The state of the s		J/

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements. 202096 thics State.tx.us

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Kristi Thibaut	2019311
4 Date	5 Full name of contributor	7 Amount of contribution (\$)
10/11/	Dennis Speight	
2	6 Contributor address; City; State; Zip Code	# 100
2019	6705 Back Bay Ln. Austin Tx 78139	
	patient 7 000 title (Oce mandenons)	
- 1	Director of Political Affairs Texas Trial	Lawyers Association
Date	Full name of contributor	Amount of contribution (\$)
11/26/	Michael Sperandio	
2019	Contributor address; City; State; Zip Code	#250
	706 Camelot Houston Ty 77024	
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	·
	real estate	mployed
Date	Full name of contributor	Amount of contribution (\$)
10/8/	Suzanne Stiles	
, , , ,	Contributor address; City; State; Zip Code	\$250
2019	11757 Taylorcrest Houston Ty 77024	7 200
Principal occur	pation / Job title (See Instructions) Employer (See Instruc	tions)
Fillicipal occup		
	Homemaker 5elf-en	hiored
Date /	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
12/31	Krioti Thibat	,
2019	Contributor address; City; State; Zip Code	\$5000
	819 Wade Haupton Dr. Houston Ty 77024	
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	itions)
Hov	remaker self-empl	0470

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME	1		3 Filer ID (Ethics Commission Filers)
	Kristi Thibaut		2019311
4 Date	5 Full name of contributor ut-of-state PAC (ID#:)	7 Amount of contribution (\$)
	Mark Thibaut		
8 15			# 250
2019	1919 11/2 de Hannata	e, Zip Code	
	919 Wade Haupton Houston 7. pation / Job title (See Instructions) 9 Er	× 77024	
8 Principal occup	pation / Job title (See Instructions)	mployer (See Instruct	tions)
VP	Crode Oil Trading	30 Hwask	Energy
Date	Full name of contributor out-of-state PAC (ID#:	}	3 /
	Mark Thibaut		Amount of contribution (\$)
9/25/			# 250
		e; Zip Code	
2019	819 Wade Hampton Hausty Tr	, -1701 J	
Principal occup	Dr Houston Ty pation / Job title (See Instructions)	mployer (See Instruct	tions)
VP C	Erude Oil Trading G	sulfmark	Eustau
	1		3
Date	Full name of contributor		Amount of contribution (\$)
12/31	Mark Thibaut		#
2019	Contributor address; City; State	e; Zip Code	#2500
	819 Wade Haupta		
	Ve. Houston Ty	77024	
Principal occup	pation / Job title (See Instructions)	mployer (See Instruc	
VP, C.	rude oil Trading C	3-Ifmark	Energy
Date	Full name of contributor		Amount of contribution (\$)
12/30	Jennifer Tucker	•	//
2019		te; Zip Code	#400
	10622 Tarleton 111	.	
	Dr. Houston Ty	x 77024	
Principal occup	pation / Job title (See Instructions)	mployer (See Instruc	
	Sales	self-e.	~ployed
			1,

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME Kristi Thibat	3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
12/17/ Chris Turner Campaign 6 Contributor address; City; State, Zip Code	P1000.
2019 P.O. Box 1820 93 Arlington Ty 76096	. •
8 Principal occupation / Job title (See instructions) 9 Employer (See Instruc	tions)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
10/16/ Chris Turner Campaian Contributor address; City: State; Zip Code P.O. Box 182093 Arlington TX 76096	# 1000
2019 P.O. Box 182093 Arlington TX 76096	. •
Principal occupation / Job title (See Instructions) Employer (See Instruc	
Date Full name of contributor	Amount of contribution (\$)
9/11/2019 Genevieue Van Cleve Contributor address; City; State; Zip Code	#150
4107 Wildwood Rd. Austin Tx 78722	
Principal occupation / Job title (See Instructions) Employer (See Instructions) State director ALL ON TH	
Date Full name of contributorout-of-state PAC (ID#)	Amount of contribution (\$)
11/6 JOE BILL WATKINS Contributor address; City; State; Zip Code	\$ 500
2019 604 Ledgeway Austin TX 78746	# 500
Principal occupation / Job title (See Instructions) Employer (See Instructions) Self-employer	ctions)
·	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME	Kristi Thibaut	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:) Melissa Weikel	7 Amount of contribution (\$)
2019	6 Contributor address; City; State; Zip Code 1601 3W Wayne Ave. Topeka KS 66604 pation / Job title (See Instructions) 9 Employer (See Instructions)	\$100
8 Principal occu	pation / Job title (See Instructions) 7 eacher 7 opeka Pu	ctions) blic Schools
Date 9/2.c/	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
2019	Contributor address; City; State; Zip Code	\$ 300
Principal occupation / Job title (See Instructions) Employer (See Instructions)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
11/7/	ANPREW WHITE Contributor address; City; State; Zip Code	\$250
2019	2911 Ella Lée Ln Hoiston TX 77019	
Principal occur	pation / Job title (See Instructions) Employer (See Instructions) President Sweat Eg	ctions) Partners
Date	Full name of contributor	Amount of contribution (\$)
2019	Contributor address; City; State; Zip Code 1301 Richmond	#500
Principal acqu	Aue. #326 Housta IX 77006 pation / Job title (See Instructions) Employer (See Instru	otional
Chief (Dra. Advertising MTC	ctions)
I		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME	Kristi Thibaut		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor ut-of-state PAC	(ID#:)	7 Amount of contribution (\$)
12/30/	JIMMY WYNN	State; Zip Code	*
. ,	#326 HOUSTO	N TX 77006	
8 Principal occu		9 Employer (See Instruct	ions)
Chie	f Org. Advertising	MTC	
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
11/7/	MARK YZAGUIRRE		4 ~
2019	8852 Merlin Ct.	State; Zip Code	₱ 10○
		Tx 77055	
	torney	Employer (See Instruct	of Houston
Date 9 / 2 5 /	Full name of contributor	(ID#:	Amount of contribution (\$)
2019	MATT ZEIS Contributor address; City;	State; Zip Code	#250
Oringinal agent		Ty 77089	
	oation / Job title (See Instructions) r of Marketing: Admin.	Employer (See Instruc GUH ma	·
Date	J _		Amount of contribution (\$)
11/22/20	MARCIE ZLOTNIK	(10#)	Amount of continuation (4)
19	Contributor address; City;	State; Zip Code	\$500
	3776 Farber St. Houston	~ Tx 77005	
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)
	retired	Self-enp	loyed
			7

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

Th	e Instruction Guide explains how to comp	lete this form.	1 Total pages Schedule A2:
2 FILER NAMI	Kristi Thibaut		3 Filer ID (Ethics Commission Filers)
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL	CONTRIBUTIONS	\$
	6 Full name of contributor out-of-state Por KLM (Keir Mussa 7 Contributor address; City; 3139 Holcombe Bludfupation / Job title (FOR NON-JUDICIAL) (See Consultant	State; Zip Code Houst M. TY 344 77025 Instructions) 11 Employee	8 Amount of 9 In-kind contribution description 250 Splash Page Check if travel outside of Texas. Complete Schedule T. If (FOR NON-JUDICIAL) (See Instructions) 5elf-employed tor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JU	JDICIAL)	
Date	Full name of contributor	AC (ID#:) State; Zip Code	Amount of In-kind contribution Contribution \$ description
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See	Instructions) Employe	Check if travel outside of Texas. Complete Schedule T. r (FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	. Contribu	tor's job title (FOR JUDICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1.	2 FILER NAME Kristi Thiba	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	-ocratic Party
6 Amount (\$)	7 Payee address;	City; State; Zip Code
#1250	4619 Lyons Ave	Howton TX 77020
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE OF	T_	Filina Fee
EXPENDITURE	tee	filing Fee
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
12/4/2019	Disc Pro	
Amount (\$)	Payee address;	City; State; Zip Code
#162.38	339 Greens Lan	ding. Houston Ty 77038
·	Category (See Categories listed at the top of this schedule)	Pescription
PURPOSE OF EXPENDITURE	Printing	Name Badge
	. Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
12/4/2019	Jenn Char	
Amount (\$)	Payee address;	City; State; Zip Code
\$2500	6208 Community Dr.	Hoiston Tx 77005
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Salary/Contract Labor	Fundraising
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

The Instruction Guide explains how to complete this form,		
1 Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
2	Kristi Thibaut	2019311
4 Date	5 Payee name	
8/15/2019	The UPS STORE	
6 Amount (\$)	7 Payee address;	City; State; Zip Code
711-5 Reimbursement from	1415 5. Vess Rd. Stello	HOUSTON TX 77057
political contributions intended		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE OF	T	J. J. II. D. J. I
EXPENDITURE	Fecs	Mail Dox Fental
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
9	Candidate / Officeholder name	Office sought Office held
Complete ONLY if direct expenditure to benefit C/OH		
Date ,	Payee name	
1 1		
12/30/2019		
Amount (\$)	Payee address;	City; State; Zip Code
Reimbursement from	1415 S. Voss Rd. Ste	City; State; Zip Code 110 Houston TX 77057
political contributions intended		
monaco	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF	_	1 - 6 11 1
EXPENDITURE	tees	Mail Dox Kental
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/	он	
B-4-		
Date	Payee name	
11/15/2019	MONARCH PRINTI	NG
Amount (\$)	Payee address;	City; State; Zip Code
Reimbursement from	6605 Mc Grew	Houston TY 77087
political contributions intended		, , , , ,
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF	3.	
EXPENDITURE	trinting expense	Stationary / envelopes
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held .
expenditure to benefit C/OH		
	ATTACH ADDITIONAL COPIES OF THIS S	SCHEDULE AS NEEDED
		·
!		

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gifl/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule G:	2 FILER NAME List: Thibat	3 Filer ID (Ethics Commission Filers)
4 Date 12/10/2019	5 Payee name US Post OFFICE	
6 Amount (\$) 100 Reimbursement from political contributions intended	7 Payee address; 8000 Long Point Rd.	City; State; Zip Code Houston TX 77055
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OTHER (c) Check if travel outside of Texas. Complete Schedule T.	(b) Description Stamps (z-100 rolls) Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought RECORDER'S MEMORANDUSE held At the time of recordation, this instrument was found to be inadequate for the best photographic reproduction because of integribility, carbon or reproduction because of integribility.
Date 9 15/2019	Payee name Bering 5	photo copy, discolored paper, etc. All blockouts, additions and changes were present at the time the instrument was filed and recorded.
Amount (\$) # 4 (6.7 4 Reimbursement from political contributions intended	Berings Payee address; 6102 West beiner R	City; State; Zip Code HEUSTON TX 77055
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundrais: expense Check if travel outside or lexas. Complete Schedule T.	Description Staticnary Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/G	Candidate / Officeholder name OH	Office sought Office held
Date 12/31/2019	Payee name Bering S	
Amount (\$) #46.74 Reimbursement from political contributions intended	Payee address; J 6102 Westheimer Ro	City: State; Zip Code 1. Houston TX 77055
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description Stationary
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Check if travel outside of Texas. Complete Schedule T. Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		