

Official Filing Authority of Harris County Clifford Tatum Elections Administrator

Campaign Finance Report

FileNo:

202342

Elections Administrator Harris County, TX

Received By Clerk: 01/17/2023

File Date: January 17, 2023

Office: District Clerk

Candidate: Burgess, Marilyn

Treasurer: Bachand-Halvorson, Jennifer

Category: Contributions And Expenditures (COH / JCOH)

Delivered By: Personal Appearance

Type: COR

Harris County No Fee

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

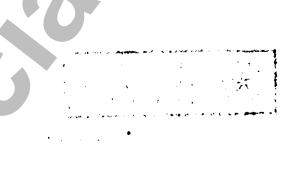
FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to	complete this form.	1. Filer ID (Ethics Commission	on Fillers)	2. Total pages	filed:
CANDIDATE/ 3 OFFICEHOLDER	MS/MRS/MR	FIRST Marilyn		MI	OFFICE L	JSE ONLY
	NICKNAME	LAST Burgess		SUFFIX		
4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS IPO BOX: P.O. Box 7235	APT/SUITE # CITY Houston	STATE: TX	ZIP CODE 77248	Date Hand-delivered	or Date Posimarked
5 CANDIDATE/ OFFICEHOLDER PHONE	(713) 557-	· · · · · · · · · · · · · · · · · · ·	EXTENSION		Receipt #	Amount \$
6 CAMPAIGN TREASURER NAME	MS/MRS/MR NICKNAME	FIRST Jennifer LAST Bachand-Halvorson		SUFFIX	Date Processed Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO B 1013 W Ellaine Ave	OX PLEASE): APT/SUITE #		STATE: TX	ZIP CODE 77506	
8 CAMPAIGN TREASURER PHONE	AREA CODE F (713) 472-:	PHONE NUMBER 3136	EXTENSION			
9 REPORT TYPE	January 15	30th day before election	Exce	eded Modified orting limit	appointment Final report (er campaign tresurer t (officeholder only) (Attach- COH-FR)
10 PERIOD COVERED	10/30/2022		ROUGH	Month	Day Yea 12/31/2022	r
11 ELECTION	ELECTION DATE Month Day 11/8/2022	Year ☐ ELECTION ☐ Primary ☐ General	Ru	unoff O	Other	
12 OFFICE	OFFICE HELD (if any) Other Office: Harris	County District Cle.	rk 13	OFFICE SOUGH Other Office:	T (if known) : Harris County Dis	strict Chrk
14 NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CANDIDATE / OF INNOWLEDGE OR CONSENT. CA OF SUCH EXPENDITURES.	OUTICAL CONTRIBUTIONS ACCE FFICEHOLDER, THESE EXPENDIT ANDIDATES AND OFFICEHOLDER	URES MAY HAVE BE	EEN MADE WITHOUT	T THE CANDIDATE'S OR	OFFICEHOLDER'S
additional pages	GENERAL SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS				
		COMMITTEE CAMPAIGN TO	REASURER NAME		.	
		COMMITTEE CAMPAIGN TR	REASURER ADDRI	ESS		
		GO TO PAG	————— E 2		-	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

				VERGILETTOE
15 C/OH NAME	Marilyn Burgess		16 F	Tiller 1D (Ethics Commission Fillers)
17 CONTRIBUTION TOTALS		AL CONTRIBUTIONS (OTHER THAN P OR CONTRIBUTIONS MADE ELECTR		\$200.00
	2 TOTAL POLITICAL CONTRIBU (OTHER THAN PLEDGES, LO	TIONS ANS, OR GUARANTEES OF LOANS)		\$940.00
EXPENDITURE TOTALS	3 TOTAL UNITEMIZED POLITICA	AL EXPENDITURES		\$243.60
•	4 TOTAL POLITICAL EXPENDITION	URES		\$14,710.87
CONTRIBUTION BALANCE	5 TOTAL POLITICAL CONTRIBU OF REPORTING PERIOD	TIONS MAINTAINED AS OF THE LAST	Γ DAY	\$5,403.57
OUTSTANDING LOAN TOTALS	6 TOTAL PRINCIPAL AMOUNT O	OF ALL OUTSTANDING LOANS AS OF IG PERIOD	THE	\$5,207.41
(1) Affidavit	Please cor IRENE ESCOBEDO My Notary ID # 124070334 Expires December 14, 2025	nplete either option below	ature of Candidate o	or Onceroider
Sworn to and subscribed day of January 20 23	before me, by the said Maci	yn Burgess	this t	he <u>1744</u>
Signature of officer admin	edo Irene	, _ 1 ,	Nota:	er/administering oath
(2) Unsworn Declaration My name is		OR , and my date	of birth is	'
My address is				
	(street)	(city)	(state)	(zip code) (country)
Executed in	County, State of	on the	day of(mont	th) (year)
				205-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1



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SUBTOTALS - COH

FORM C/OH COVER SHEET PG 3

19.	FILER NAME Marilyn Burgess	20. FILER ID (Ethics Commission Filers)
21.	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTALS AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$940.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$0.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$0.00
4.	SCHEDULE E: LOANS	\$0.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBU	TIONS \$12,699.92
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIL	BUTIONS \$0.00
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$2,000.95
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$10.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSIN	IESS OF C/OH \$0.00
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRI	BUTIONS \$0.00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIBUTIONS RETO FILER	SO.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The	Instruction Guide explains how	to complete this fo	rm.	Total pages Schedule A1: not available
2. FILER NAI Marilyn Bu		<u></u>		3. Filer ID (Ethics Commission Filers)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
11/22/2022	Cy-Fair Area Democratic Club			\$100.00
	6. Contributor address;	City; State;	ZIP Code	
	14119 Hillvale Dr Houston, TX 7	77077-1408		
8. Principal o	ccupation / Job title (See Instruction	is)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC	L	7. Amount of contribution (\$)
12/29/2022	Jan Adam	_		\$50.00
	6. Contributor address;	City; State;	ZIP Code	\$30.00
	1807 Sand Hollow Ln Katy, TX 1	77450-5224	· ·	
8. Principal o	ccupation / Job title (See Instruction	is)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
12/20/2022	Mary Benton			\$100.00
	6. Contributor address;	City; State;	ZIP Code	
	3230 Holly Hall St Houston, TX	77054-4162		İ
8. Principal o	ccupation / Job title (See Instruction	is)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)
11/08/2022	Misty Brown			\$25.00
	6. Contributor address;	City; State;	ZIP Code	
	17807 Springtree Dr Humble, TX	77396-1639		
8. Principal o	ccupation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)
4. Date	5. Full name of contributor	Out-of-state PAC		7. Amount of contribution (\$)
12/08/2022	Misty Brown			\$25.00
	6. Contributor address;	City; State;	ZIP Code	
	17807 Springtree Dr Humble, TX	. 77396-1639		
8. Principal oc	ocupation / Job title (See Instruction	s)	9 Emplo	yer (See Instructions)
			}	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			Total pages Schedule A1: not available		
2. FILER NAM Marilyn Bur				3. Filer ID (Ethics Commission Filers)	
4. Date	5. Full name of contributor	Out-of-state PAC		7. Amount of contribution (\$)	
11/01/2022	Angellia Dozier			\$50.00	
	6. Contributor address;	City; State;	ZIP Code		
	939 ACACIAWOOD Way Houston	, TX 77051			
8. Principal or	ccupation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
11/01/2022	Irene Escobedo			\$100.00	
	6. Contributor address;	City; State;	ZIP Code		
	226 E Oak St Deer Park, TX 77536-	4104			
8. Principal oc	ccupation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
11/09/2022	Roselyn Flannigan			\$250.00	
	6. Contributor address;	City; State;	ZIP Code		
	4330 Cedar Ridge Trl Houston, TX	77059-3114			
8. Principal oc	ocupation / Job title (See Instructions)		9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	out-of-state PAC		7. Amount of contribution (\$)	
11/01/2022	Nancy Friedman			\$20.00	
	6. Contributor address;	City; State;	ZIP Code		
	1313 Pine Chase Dr Houston, TX 77	7055-6721			
8. Principal oc	ccupation / Job title (See Instructions)	>	9 Employ	yer (See Instructions)	
4. Date	5. Full name of contributor	Out-of-state PAC		7. Amount of contribution (\$)	
12/01/2022	Nancy Friedman			\$20.00	
	6. Contributor address;	City; State;	ZIP Code		
	1313 Pine Chase Dr Houston, TX 77	/055-6721			
8. Principal oc	cupation / Job title (See Instructions)		9 Employ	ver (See Instructions)	

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 FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guil	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contrac de explains how to con	t Labor	Transportation Expense Travel In Distric Travel Out of D Other (enter a c	
Total pages Schedule F1:	2. FILER NAME Marilyn Burgess		3. File	er ID (Ethics C	commission Filers)
4 Date 11/19/2022	5 Payee name Aceves Communications, LLC		- 1.		
6 Amount \$8,000.00	7 Payee address; PO Box 6514 Houston, TX 772	City; 265-6514	State:		Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Advertising Expense	at the top of this schedule)	(b) Descrip	otion	
	Check if travel outside of Texas, co				eholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	l 	Office held
4 Date 11/25/2022	5 Payee name Cardmember Services	MO			
6 Amount \$3,628.61	7 Payee address; PO Box 6294 Carol Stream, IL	City; 60197-6294	State:		Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Credit Card Total Check If travet outside of Texas, co		(b) Descrip		sholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	***	Office held
4 Date 12/19/2022	5 Payee name Cardmember Services				
6 Amount \$966.74	7 Payee address; PO Box 6294 Carol Stream, IL	City; 60197-6294	State:		Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Credit Card Total	at the top of this schedule)	(b) Descrip	ition	
	Check if travel outside of Texas, co				eholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	C	Office sought		Office held
	ATTACH ADDITIONAL COP	MES OF THIS SCHE	DULE AS	NEEDED	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

	EXPEND	TURE CATEGORIES FO	OR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Political Committee Credit Card Payment	Legal Services	Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract L ide explains how to comp	Transporta Expense Labor Travel In D Travel Out Other (enti	
Total pages Schedule F1:	2. FILER NAME Marilyn Burgess		3. Filer ID (Ethi	cs Commission Filers)
4 Date 11/21/2022	5 Payee name Paragon Payment Solutions			
6 Amount \$97.58	7 Payee address; 2141 E Broadway Rd Ste 202	City; Tempe, AZ 85282-1895	State:	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed Focs		b) Description	
Complete ONLY if direct expenditure to benefit C/OH	Check if travel outside of Texas, or Candidate/Officeholder name	**	ice sought	officeholder fiving expense Office held

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense **Event Expense** Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Fees Consulting Expense Food/Beverage Expense Polling Expense Expense Contributions/Donations Made By Gift/Awards/Memorials Expense Printing Expense Travel In District Travel Out of District Candidate/Officeholder/Political Legal Services Salaries/Wages/Contract Labor Committee Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 1. Total pages Schedule F4: 2. FILER NAME 3. Filer ID (Ethics Commission Filers) Marilyn Burgess TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$236.61 5 Date 6 Payee name 12/17/2022 Costco City: State: Zip Code 7 Amount 8 Pavee address: \$177.74 Expenditure from Corporate Funds 21802 Townsen Blvd W Humble, TX 77338-1594 TYPE OF **✓** Political Non-Political **EXPENDITURE** Not Applicable for Form DCE 10 (b) Description (a) Category (See categories listed at the top of this schedule) Food/Beverage Expense **PURPOSE** OF **EXPENDITURE** (C) Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense 11 Complete ONLY if direct Office sought Office held Candidate/Officeholder name expenditure to benefit C/OH 5 Date 6 Payee name 12/31/2022 Harold's Tap Room 8 Payee address: City: State: Zio Code 7 Amount \$272.99 Expenditure from Corporate Funds 350 W 19th St Houston, TX 77008-3971 TYPE OF ✓ Political ■ Non-Political **EXPENDITURE** Not Applicable for Form DCE 10 (b) Description (a) Category (See categories listed at the top of this schedule) Food/Beverage Expense **PURPOSE** OF **EXPENDITURE** (C) Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense 11 Complete ONLY if direct Office sought Office held Candidate/Officeholder name expenditure to benefit C/OH

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense **Event Expense** Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Fees Food/Beverage Expense Consulting Expense Polling Expense Expense Contributions/Donations Made By Gift/Awards/Memorials Expense Printing Expense Travel In District Travel Out of District Candidate/Officeholder/Political Salaries/Wages/Contract Labor Legal Services Committee Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 1. Total pages Schedule F4: 2. FILER NAME 3. Filer ID (Ethics Commission Filers) Marilyn Burgess 4. TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$236.61 5 Date 6 Payee name 12/14/2022 Harris County Democratic Party City: State: Zio Code 7 Amount 8 Payee address: \$15.00 Expenditure from Corporate Funds 4719 Lyons Ave Houston, TX 77020-4306 TYPE OF Non-Political **✓** Political EXPENDITURE Not Applicable for Form DCE 10 (a) Category (See categories listed at this top of this schedule) Contributions/Donations Made By (b) Description PURPOSE Candidate/Officeholder/Political Committee OF EXPENDITURE (C) Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH 5 Date 6 Payee name 11/07/2022 **HCCLA** 8 Payee address: City: State: Zip Code 7 Amount \$175.00 Expenditure from Corporate Funds PO Box 924523 Houston, TX 77292-4523 TYPE OF ✓ Political ☐ Non-Political EXPENDITURE Not Applicable for Form DCE 10 (b) Description (a) Category (See categories listed at the top of this schedule) Advertising Expense **PURPOSE** OF **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Solicitation/Fundraising Expense Advertising Expense Event Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Fees Consulting Expense Food/Beverage Expense Polling Expense Expense Travel In District Contributions/Donations Made 8v Gift/Awards/Memorials Expense Printing Expense Travel Out of District Candidate/Officeholder/Political Legal Services Salaries/Wages/Contract Labor Committee Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 1. Total pages Schedule F4: 2. FILER NAME 3. Filer ID (Ethics Commission Filers) Marilyn Burgess 4. TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$236.61 5 Date 6 Payee name 11/19/2022 HEB 7 Amount City: State: Zip Code 8 Payee address: \$75.39 Expenditure from Corporate Funds 2300 N Shepherd Dr Houston, TX 77008-1956 TYPE OF Non-Political ✓ Political **EXPENDITURE** Not Applicable for Form DCE 10 (b) Description (a) Category (See categories listed at the top of this schedule) Food/Beverage Expense **PURPOSE** OF **EXPENDITURE** (C) Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH 5 Date 6 Payee name 12/16/2022 HEB City: State: Zio Code 7 Amount 8 Payee address: \$147.22 Expenditure from Corporate Funds 2300 N Shepherd Dr Houston, TX 77008-1956 TYPE OF **✓** Political ■ Non-Political **EXPENDITURE** Not Applicable for Form DCE 10 (a) Category (See categories listed at the top of this schedule) Food/Beverage Expense (b) Description **PURPOSE** OF **EXPENDITURE** (C) Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder tiving expense Office sought 11 Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH

ATTACH ADDITIONAL COPIE	S OF	THIS SCHEDULE	AS NEEDED
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SCHEDULE F4

	EXPENDIT	URE CATEGORIES FOR BOX	8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Legal Services	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)	
Total pages Schedule F4:		ide explains how to complete t	iler ID (Ethics Commission Filers)	
1. Total pages ochodole 1 4.	Marilyn Burgess	J ^{3.} '	nei ib (Lunca commission) neraj	
4. TOTAL OF UNITEMIZED	EXPENDITURES CHARGED T	O A CREDIT CARD	\$236	5.61
5 Date	6 Payee name			_
11/05/2022	Kroger			
7 Amount \$70.22	8 Payee address:	City: State:	Zip Code	
Expenditure from Corporate Funds	1035 N Shepherd Dr Houston, T	X 77008-6528		
9 TYPE OF EXPENDITURE	√ Political	Non-Political Not Ap	plicable for Form DCE	
PURPOSE OF	(a) Category (See categories listed a Food/Beverage Expense	t the top of this schedule) (b) Descri	iption	
EXPENDITURE	(C) Check if travel outside of Texas, cor		f Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office soug	ht Office held	
5 Date 11/20/2022	6 Payee name Kroger	·		
7 Amount \$16.86	8 Payee address:	City: State:	Zip Code	
Expenditure from Corporate Funds	1035 N Shepherd Dr Houston, T	X 77008-6528		
9 TYPE OF EXPENDITURE	☑ Political □	Non-Political Not Ap	plicable for Form DCE	
PURPOSE OF	(a) Category (See categories listed at Food/Beverage Expense	t the top of this schedule) (b) Descr	iption	
EXPENDITURE	(C) Check if travel outside of Texas, con	nplete Schedule T	Austin, TX, officeholder flving expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office soug	ht Office held	

SCHEDULE F4

	EXPENDIT	URE CATEGORIES FOR BO	JX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Expensional Expension Polling Expense	Expense Travel In District	
	The Instruction Go	uide explains how to complet	e this form.	
Total pages Schedule F4:	FILER NAME Marilyn Burgess	3.	Filer ID (Ethics Commission Filers)	
4. TOTAL OF UNITEMIZED	EXPENDITURES CHARGED T	O A CREDIT CARD	\$236.	61
5 Date 11/01/2022	6 Payee name NGPVAN, Inc.			
7 Amount \$266.50 Expenditure from Corporate Funds	8 Payee address: 1445 New York Ave NW Ste 20	City: Star 20 Washington, DC 20005-2158		
9 TYPE OF EXPENDITURE	☑ Political ☐	Non-Political Not	Applicable for Form DCE	
PURPOSE OF	(a) Category (See categories listed a Fees	it the top of this schedule) (b) Des	scription	
EXPENDITURE	(C) Check if travel outside of Texas, co.	mplete Schedule T Ched	ck if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office so	ought Office held	
5 Date 12/01/2022	6 Payee name NGPVAN, Inc.	·		
7 Amount \$266.50 Expenditure from Corporate Funds	8 Payee address: 1445 New York Ave NW Ste 20	City: Stat 0 Washington, DC 20005-2158		
9 TYPE OF EXPENDITURE		Non-Political Not	Applicable for Form DCE	
PURPOSE OF	(a) Category (See categories listed a Focs	t the top of this schedule) (b) Des	scription	
EXPENDITURE	(C) Check if travel outside of Texas, cor	repliate Schedule T	ck if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office so	ught Office held	

SCHEDULE F4

	EXPENDIT	DRE CATEGORIES FOR BOX	(o(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Expense Polling Expense	Transportation Equipment & Related Expense Travel In District Travel Out of District Other (enter a category not listed above)
	The Instruction Ge	ide explains how to complete	this form.
Total pages Schedule F4:	2. FILER NAME Marilyn Burgess	3. 1	Filer ID (Ethics Commission Filers)
4. TOTAL OF UNITEMIZED	EXPENDITURES CHARGED T	O A CREDIT CARD	\$236.61
5 Date 11/22/2022	6 Payee name Office Depot		
7 Amount \$90.92 Expenditure from Corporate Funds	8 Payee address: 1401 North Loop W Houston, T	City: State X 77008-1647	: Zip Code
9 TYPE OF EXPENDITURE		Non-Political Not A	pplicable for Form DCE
PURPOSE OF	(a) Category (See categories listed a Office Overhead/Rental Expense	at the top of this schedule) (b) Desc	ription
EXPENDITURE	(C) Check if travel outside of Texas, co	mplete Schedule TCheck	if Austin, TX, officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sou	ght Office held
5 Date 11/27/2022	6 Payee name Planned Parenthood Gulf Coast		
7 Amount \$20.00 Expenditure from Corporate Funds	8 Payee address: 4600 Gulf Fwy Houston, TX 776	City: State: 023-3533	Zip Code
9 TYPE OF EXPENDITURE		Non-Political Not A	pplicable for Form DCE
PURPOSE OF	(a) Category (See estagories listed a Contributions/Donations Made By Candidate/Officeholder/Political Com	t the top of this schedule) (b) Desc mittee	ription
EXPENDITURE	(C) Check if travel outside of Texas, cor	replate Schedule T Check	If Austin, TX, officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sou	ght Office held

SCHEDULE F4

	EXPENDIT	URE CATEGORIES I	TOR BOX	O(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee	Legal Services	Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra	at Expense	Solicitation/Fundraising Transportation Equipm Expense Travel In District Travel Out of District Other (enter a category	ent & Related
		uide explains how to c	`		
Total pages Schedule F4:			3. FI	iler ID (Ethics Commis	ssion Filers)
	Marilyn Burgess				
4. TOTAL OF UNITEMIZED	EXPENDITURES CHARGED T	O A CREDIT CARD			\$236.61
5 Date	6 Payee name				
12/27/2 02 2	Planned Parenthood Gulf Coast				
7 Amount \$20.00	8 Payee address:	City:	State:	Zip C	ode
Expenditure from Corporate Funds	4600 Gulf Fwy Houston, TX 77	023-3533			
9 TYPE OF EXPENDITURE	✓ Political	Non-Political	Not App	plicable for Form DCE	
10 PURPOSE OF	(a) Category (See categories listed a Contributions/Donations Made By Candidate/Officeholder/Political Con	at the top of this schedule) amittee	(b) Descri	iption	
EXPENDITURE	(C) Check if travel outside of Texas, co	implete Schedule T	Check if	Austin, TX, officeholder livin	g expense
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sough	ht O	ffice held
5 Date	6 Payee name				
11/20/2022	The Union Kitchen	·			
7 Amount \$150.00	8 Payee address: 23918 Highway 59 N Kingwood	City: 1. TX 77339-1534	State:	Zip C	ode
Corporate Funds		•			
9 TYPE OF EXPENDITURE	☑ Political ☐	Non-Political	Not App	plicable for Form DCE	
PURPOSE OF	(a) Category (See categories listed a Gift/Awards/Memorials Expense	at the top of this schedule)	(b) Descri	iption	
EXPENDITURE	(C) Check if travel outside of Texas, co.	mplete Schedule T	Check if	Austin, TX, officeholder living	g expense
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	(Office sough	ht O	ffice held

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 Polling Expense
Gift/Awards/Memorials Expense Printing Expense

Legal Services

Office Overhead/Rental Expense Transportation Equipment & Related

Salaries/Wages/Contract Labor

Loan Repayment/Reimbursement Solicitation/Fundraising Expense

Expense

Travel In District Travel Out of District

Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

Total pages Schedule G:	2. FILER NAME Marilyn Burgess	3. Filer ID (Ethics Commission Filers)
4 Date 11/02/2022	5 Payee name PREMIER PARKING - TX W	
6 Amount \$10.00 Reimbursement from political contributions intended	7 Payee address; City; 400 Main St Houston, TX 77002-1802	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel In District (C) Check if travel outside of Texas, complete Schedule T	(b) Description Check If Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	ffice sought Office held