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Official Filing Authority of Harris County
Isabel Longoria
Elections Administrator

Campaign Finance Report



Elections Administrator
Harris County, TX

FileNo: 2021218
Received By Clerk: 7/15/2021
File Date: July 15, 2021
Office: District Clerk
Candidate: Burgess, Marilyn
Treasurer: Bachand-Halvorson, Jennifer
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

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID		2 Total pages filed: 36	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Marilyn	MI	OFFICE USE ONLY Date Received	
	NICKNAME	LAST Burgess	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; PO Box 7235 Houston, TX: 77248		ZIP CODE	Date Hand-delivered or Date Postmarked	
				Receipt #	Amount
				Date Processed	
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Jennifer	MI		
	NICKNAME	LAST Bachand-Halvorson	SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 1013 W Ellaine Ave		APT / SUITE #;	CITY; Pasadena	STATE; TX ZIP CODE 77506
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month Day Year 01/01/2021	THROUGH		Month Day Year 06/30/2021	
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE		
			<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) District Clerk Harris		12 OFFICE SOUGHT (if known)		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2


2 of 36

13 C / OH NAME Burgess, Marilyn	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 288.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3,068.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 7,207.80
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 8,207.87
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFADAVIT



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.

M. Burgess
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Marilyn Burgess, this the 15 day of July, 2021, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering

Delia Macias
Printed name of officer administering

Notary Public
Title of officer administering oath

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

3 of 36

18 FILER NAME Burgess, Marilyn		19 Filer ID	
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	3,068.00
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	\$	7,207.80
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/8 Rpt: 4/36
2 FILER NAME Burgess, Marilyn		3 Filer ID
4 Date 06/25/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Adams, Karen	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code 1022 Nicholson St Houston, TX 77008	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 04/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bond, Ingrid	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 2504 Del Monte Houston, TX 77019	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brantley, Kim	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 3070 Amberwood St Springdale, TX 72762	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/01/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Misty	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 17807 Springtree Dr Humble, TX 77396	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Misty	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 17807 Springtree Dr Humble, TX 77396	
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: 2/8 Rpt: 5/36
2 FILER NAME Burgess, Marilyn		3 Filer ID
4 Date 05/21/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Misty 6 Contributor address; City; State; Zip Code 17807 Springtree Dr Humble, TX 77396	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Misty Contributor address; City; State; Zip Code 17807 Springtree Dr Humble, TX 77396	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/25/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Misty Contributor address; City; State; Zip Code 17807 Springtree Dr Humble, TX 77396	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/29/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chalfin, Stephanie Contributor address; City; State; Zip Code 2921 Wildflower Ln Baton Rouge, LA 70809	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chopra, Gurbabir Contributor address; City; State; Zip Code 1115 E Gail Dr. Chandler, AZ 85225	Amount of Contribution (\$) \$250.00
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: 3/8 Rpt: 6/36
2 FILER NAME Burgess, Marilyn		3 Filer ID
4 Date 06/29/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffey, Don	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 4009 Stoneybrook Dr Baytown, TX 77521	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cones, Marian	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 1326 Moorhead Drive Houston, TX 77055	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/29/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Council, Ken	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code 1609 Woodhead St Houston, TX 77019	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeHart, Dalton	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 2829 Timmons Ln #201 Houston, TX 77027	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/29/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeHart, Dalton	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code 2829 Timmons Ln #201 Houston, TX 77027	
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: 4/8 Rpt: 7/36
2 FILER NAME Burgess, Marilyn		3 Filer ID
4 Date 04/28/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Friedrich, Mary Anne	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code 5430 Hummingbird Street Houston, TX 77096		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/24/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Friedrich, Mary Anne	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 5430 Hummingbird Street Houston, TX 77096		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harris, Edna	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 5646 Abundant Life Ln Houston, TX 77048		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/23/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heger, Wendy	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 9715 Riddlewood Ln Houston, TX 77025		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heger, Wendy	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 9715 Riddlewood Ln Houston, TX 77025		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONEY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/8 Rpt: 8/36
2 FILER NAME Burgess, Marilyn		3 Filer ID
4 Date 06/29/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hester, Tina	7 Amount of Contribution (\$) \$150.00
6 Contributor address; City; State; Zip Code 8425 La Plata Loop Austin, TX 78737		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/24/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huebel, Martha	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code 5830 McKnight St. Houston, TX 77035		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kamish, Marsha	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 21731 Park Brook Drive Katy, TX 77450		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/29/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landry, Marjorie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 2701 Bellefontaine A-3 Houston, TX 77025		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/24/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Johnathan	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 4004 Montrose Blvd 19D Houston, TX 77006		
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: 6/8 Rpt: 9/36
2 FILER NAME Burgess, Marilyn		3 Filer ID
4 Date 06/23/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mowery, Deborah	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 3414 Kingsway Ct Humble, TX 77336	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mullin, Michele	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 6910 Yellowstone Way Dr Houston, TX 77054	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/29/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Natarajan, Rufi	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 5201 Memorial Dr Houston, TX 77007	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/28/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Campo, Sylvia	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 9703 Shadowglade Ct Houston, TX 77064	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/29/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Campo, Sylvia	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code 9703 Shadowglade Ct Houston, TX 77064	
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: 7/8 Rpt: 10/36
2 FILER NAME Burgess, Marilyn		3 Filer ID
4 Date 06/30/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reiland, Pam 6 Contributor address; City; State; Zip Code 2400 Mechanic St Apt 303 Galveston, TX 77550	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 05/07/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snively, Judith Contributor address; City; State; Zip Code 2480 Times Blvd Ste 201 Houston, TX 77005	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snively, Judith Contributor address; City; State; Zip Code 2480 Times Blvd Ste 201 Houston, TX 77005	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sorola-Pohlman, Lenora Contributor address; City; State; Zip Code 2314 Tannehill Dr Houston, TX 77008	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/29/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spivey, Pam Contributor address; City; State; Zip Code 3607 Sweetgum Hill Ln Kingwood, TX 77345	Amount of Contribution (\$) \$25.00
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: 8/8 Rpt: 11/36
2 FILER NAME Burgess, Marilyn		3 Filer ID
4 Date 01/08/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Trautman, Diane	7 Amount of Contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code PO Box 6067 Kingwood, TX 77325	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/14/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weatherford, Wanda	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 18299 Hollyberry Ct, Porter, TX 77365	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wells, Stephanie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 201 Main St Unit 7H Houston, TX 77002	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/25 Rpt: 12/36	2 FILER NAME Burgess, Marilyn	3 Filer ID
4 Date 06/11/2021	5 Payee name 24 Waterway LLC	
6 Amount (\$) \$4.00	7 Payee address; City; State; Zip Code 24 Waterway The Woodlands, TX 77380	
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 Parking
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 06/30/2021	Candidate/Officeholder name Act Blue	Office sought Office held
Amount (\$) \$9.89	Payee address; City; State; Zip Code PO Box 441146 Sommerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete ONLY if direct expenditure to benefit C/OH		
Date 06/30/2021	Candidate/Officeholder name Adan Figuero	Office sought Office held
Amount (\$) \$24.25	Payee address; City; State; Zip Code 14618 MCNAIR ST Houston, TX 77015	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing
Complete ONLY if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/25 Rpt: 13/36	2 FILER NAME Burgess, Marilyn	3 Filer ID
4 Date 01/29/2021	5 Payee name Amegy	
6 Amount (\$) \$2.00	7 Payee address; City; State; Zip Code P.O. Box 27459 Houston, TX 77248	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bank fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/28/2021	Candidate/Officeholder name	Office sought
Amount (\$) \$2.00	Payee name Amegy	Office held
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bank fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/31/2021	Candidate/Officeholder name	Office sought
Amount (\$) \$2.00	Payee name Amegy	Office held
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bank fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/25 Rpt: 14/36	2 FILER NAME Burgess, Marilyn	3 Filer ID
4 Date 04/30/2021	5 Payee name Amegy	
6 Amount (\$) \$2.00	7 Payee address; City; State; Zip Code P.O. Box 27459 Houston, TX 77248	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bank fees
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 05/28/2021	Candidate/Officeholder name	Office sought
Payee name Amegy	Office held	
Amount (\$) \$2.00	Payee address; City; State; Zip Code P.O. Box 27459 Houston, TX 77248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bank fees
Complete ONLY if direct expenditure to benefit C/OH		
Date 06/30/2021	Candidate/Officeholder name	Office sought
Payee name Amegy	Office held	
Amount (\$) \$2.00	Payee address; City; State; Zip Code P.O. Box 27459 Houston, TX 77248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bank fees
Complete ONLY if direct expenditure to benefit C/OH		
Date 06/30/2021	Candidate/Officeholder name	Office sought
Payee name Amegy	Office held	
Amount (\$) \$2.00	Payee address; City; State; Zip Code P.O. Box 27459 Houston, TX 77248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bank fees
Complete ONLY if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/25 Rpt: 15/36	2 FILER NAME Burgess, Marilyn	3 Filer ID
4 Date 05/17/2021	5 Payee name Area 5 Democrats	
6 Amount (\$) \$20.00	7 Payee address; City; State; Zip Code 3800 Spencer Hwy Ste L Pasadena, TX 77504	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense annual membership
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/07/2021	Payee name Biden Inaugural Committee	
Amount (\$) \$10.00	Payee address; City; State; Zip Code 430 South Capitol Street SE Washington, DC 20003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/03/2021	Payee name Botanga	
Amount (\$) \$39.14	Payee address; City; State; Zip Code 900 Congress Houston, TX 77002	
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 Team meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/25 Rpt: 16/36	2 FILER NAME Burgess, Marilyn	3 Filer ID
4 Date 06/09/2021	5 Payee name Downtown Rotary	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 500 Texas Ave Houston, TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Luncheon Fee
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 06/22/2021	Candidate/Officeholder name Payee name El Big Bad	Office sought Office held
Amount (\$) \$45.67	Payee address; City; State; Zip Code 419 Travis Houston, TX 77002	
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 Team meeting food
Complete ONLY if direct expenditure to benefit C/OH		
Date 06/15/2021	Candidate/Officeholder name Payee name Franks Pizza	Office sought Office held
Amount (\$) \$6.00	Payee address; City; State; Zip Code 417 Travis Houston, TX 77002	
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 & Beverage
Complete ONLY if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/25 Rpt: 17/36	2 FILER NAME Burgess, Marilyn	3 Filer ID
4 Date 06/30/2021	5 Payee name Go Daddy	
6 Amount (\$) \$19.17	7 Payee address; City; State; Zip Code 14455 Hayden Road Scottsdale, AZ 85260	
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 domain renewal
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/12/2021	Candidate/Officeholder name HCDLA	Office sought Office held
Amount (\$) \$75.00	Payee address; City; State; Zip Code 3401 Allen Pkwy #100 Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense membership
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/17/2021	Candidate/Officeholder name HCDLA	Office sought Office held
Amount (\$) \$250.00	Payee address; City; State; Zip Code 3401 Allen Pkwy #100 Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Clarence Darrow Sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/25 Rpt: 18/36	2 FILER NAME Burgess, Marilyn	3 Filer ID
4 Date 03/24/2021	5 Payee name HEB	
6 Amount (\$) \$128.44	7 Payee address; City; State; Zip Code 2300 N Shepherd Dr Houston, TX 77008	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense JRR watch party refreshments
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/17/2021	Candidate/Officeholder name Payee name HEB	
Amount (\$) \$88.92	Payee address; City; State; Zip Code 2300 N Shepherd Dr Houston, TX 77008	
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 staff appreciation Party food
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/14/2021	Candidate/Officeholder name Payee name Harris Co. Democratic Party	
Amount (\$) \$15.00	Payee address; City; State; Zip Code 4719 Lyons Ave Houston, TX 77020	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sustaining membership
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/25 Rpt: 19/36		2 FILER NAME Burgess, Marilyn		3 Filer ID
4 Date 01/29/2021		5 Payee name Harris Co. Democratic Party		
6 Amount (\$) \$10.00		7 Payee address; City; State; Zip Code 4719 Lyons Ave Houston, TX 77020		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Valentine's fundraiser	
9 Complete ONLY if direct expenditure to benefit C/OH				
Date 02/14/2021		Candidate/Officeholder name Harris Co. Democratic Party		
Amount (\$) \$15.00		Payee address; City; State; Zip Code 4719 Lyons Ave Houston, TX 77020		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sustaining membership	
Complete ONLY if direct expenditure to benefit C/OH				
Date 03/02/2021		Candidate/Officeholder name Harris Co. Democratic Party		
Amount (\$) \$1,000.00		Payee address; City; State; Zip Code 4719 Lyons Ave Houston, TX 77020		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense JRR Sponsorship	
Complete ONLY if direct expenditure to benefit C/OH				
Date 03/02/2021		Candidate/Officeholder name Harris Co. Democratic Party		
Amount (\$) \$1,000.00		Payee address; City; State; Zip Code 4719 Lyons Ave Houston, TX 77020		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense JRR Sponsorship	
Complete ONLY if direct expenditure to benefit C/OH				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services¹

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/25 Rpt: 20/36	2 FILER NAME Burgess, Marilyn	3 Filer ID
4 Date 03/14/2021	5 Payee name Harris Co. Democratic Party	
6 Amount (\$) \$15.00	7 Payee address; City; State; Zip Code 4719 Lyons Ave Houston, TX 77020	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sustaining membership
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/08/2021	Candidate/Officeholder name Payee name Harris Co. Democratic Party	
Amount (\$) \$100.00	Office sought Payee address; City; State; Zip Code 4719 Lyons Ave Houston, TX 77020	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HCDP's Second Annual Ifar sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/13/2021	Candidate/Officeholder name Payee name Harris Co. Democratic Party	
Amount (\$) \$500.00	Office sought Payee address; City; State; Zip Code 4719 Lyons Ave Houston, TX 77020	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense We Run the World sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/25 Rpt: 21/36	2 FILER NAME Burgess, Marilyn	3 Filer ID
4 Date 04/14/2021	5 Payee name Harris Co. Democratic Party	
6 Amount (\$) \$15.00	7 Payee address; City; State; Zip Code 4719 Lyons Ave Houston, TX 77020	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sustaining membership
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/14/2021	Payee name Harris Co. Democratic Party	
Amount (\$) \$15.00	Payee address; City; State; Zip Code 4719 Lyons Ave Houston, TX 77020	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sustaining membership
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/21/2021	Payee name Harris Co. Democratic Party	
Amount (\$) \$5.00	Payee address; City; State; Zip Code 4719 Lyons Ave Houston, TX 77020	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2021 Bid on Blue ticket
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/25 Rpt: 22/36	2 FILER NAME Burgess, Marilyn	3 Filer ID
4 Date 06/04/2021	5 Payee name Harris Co. Democratic Party	
6 Amount (\$) \$40.44	7 Payee address; City; State; Zip Code 4719 Lyons Ave Houston, TX 77020	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Road to 2022
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/14/2021	Payee name Harris Co. Democratic Party	
Amount (\$) \$15.00	Payee address; City; State; Zip Code 4719 Lyons Ave Houston, TX 77020	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense sustaining membership
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2021	Payee name Holman Draft Hall	
Amount (\$) \$13.99	Payee address; City; State; Zip Code 820 Holman St Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 checking out locn for event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/25 Rpt: 23/36	2 FILER NAME Burgess, Marilyn	3 Filer ID
4 Date 06/24/2021	5 Payee name Hotel Zsa Zsa	
6 Amount (\$) \$14.00	7 Payee address; City; State; Zip Code 5701 Main St Houston, TX 77005	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense HCDLA Clarence Darrow parking
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/02/2021	Payee name Houston GLBT Political Caucus	
Amount (\$) \$40.00	Payee address; City; State; Zip Code P.O. Box 66664 Houston, TX 77266	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense membership
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/21/2021	Payee name Houston GLBT Political Caucus	
Amount (\$) \$100.00	Payee address; City; State; Zip Code P.O. Box 66664 Houston, TX 77266	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Summer Fling ticket
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/25 Rpt: 24/36	2 FILER NAME Burgess, Marilyn	3 Filer ID
4 Date 04/25/2021	5 Payee name Houston Young Professionals	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 2425 Capitol Houston, TX 77003	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 20 YPO's Networking Mixer at The Houston Club
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/17/2021	Payee name Human Age Digital	
Amount (\$) \$1,250.00	Payee address; City; State; Zip Code 2700 Post Oak Blvd 21st Floor Houston, TX 77056	
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 design
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/02/2021	Payee name Irma's	
Amount (\$) \$69.62	Payee address; City; State; Zip Code 1475 Texas Ave Houston, TX 77002	
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 with supporter
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/25 Rpt: 25/36		2 FILER NAME Burgess, Marilyn		3 Filer ID
4 Date 02/03/2021		5 Payee name Jane Due's Process		
6 Amount (\$) \$10.00		7 Payee address; City; State; Zip Code P.O. Box 685137 Austin, TX 78768		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense sustaining membership	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 03/03/2021		Payee name Jane Due's Process		
Amount (\$) \$10.00		Payee address; City; State; Zip Code P.O. Box 685137 Austin, TX 78768		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense sustaining membership	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 04/03/2021		Payee name Jane Due's Process		
Amount (\$) \$10.00		Payee address; City; State; Zip Code P.O. Box 685137 Austin, TX 78768		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sustaining membership	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/25 Rpt: 26/36	2 FILER NAME Burgess, Marilyn	3 Filer ID
4 Date 05/12/2021	5 Payee name Lindsey Wentzel	
6 Amount (\$) \$150.00	7 Payee address; City; State; Zip Code 130 Pike Mill Pl Montgomery, TX 77316	
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 Photography fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/01/2021	Payee name Mail Chimp	
Amount (\$) \$67.15	Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE # 5000 Atlanta, GA 30308	
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 email host
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/02/2021	Payee name Mail Chimp	
Amount (\$) \$67.15	Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE # 5000 Atlanta, GA 30308	
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 email host
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/25 Rpt: 27/36		2 FILER NAME Burgess, Marilyn		3 Filer ID
4 Date 03/01/2021		5 Payee name Mail Chimp		
6 Amount (\$) \$67.15		7 Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE # 5000 Atlanta, GA 30308		
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 email host
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 04/02/2021		Payee name Mail Chimp		
Amount (\$) \$67.15		Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE # 5000 Atlanta, GA 30308		
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 email host
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 05/01/2021		Payee name Mail Chimp		
Amount (\$) \$67.15		Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE # 5000 Atlanta, GA 30308		
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 email host
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/25 Rpt: 28/36	2 FILER NAME Burgess, Marilyn	3 Filer ID
4 Date 06/02/2021	5 Payee name Mail Chimp	
6 Amount (\$) \$67.15	7 Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE # 5000 Atlanta, GA 30308	
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 email host
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/16/2021	Payee name Martin Luther King, Jr. Parade Foundation, Inc.	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 5330 Griggs Road Ste #A119 Houston, TX 77021	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense virtual parade entry fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/24/2021	Payee name NGPVAN, Inc.	
Amount (\$) \$159.90	Payee address; City; State; Zip Code 1445 New York Ave. NW, Suite 200 Washington, DC 20005	
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 subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/25 Rpt: 29/36		2 FILER NAME Burgess, Marilyn		3 Filer ID
4 Date 02/26/2021		5 Payee name Office Depot		
6 Amount (\$) \$88.75		7 Payee address; City; State; Zip Code 1401 N Loop W, Houston, TX 77008		
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 Supplies	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 03/25/2021		Payee name Office Depot		
Amount (\$) \$21.64		Payee address; City; State; Zip Code 1401 N Loop W, Houston, TX 77008		
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 Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 05/26/2021		Payee name Office Depot		
Amount (\$) \$84.42		Payee address; City; State; Zip Code 1401 N Loop W, Houston, TX 77008		
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 Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/25 Rpt: 30/36	2 FILER NAME Burgess, Marilyn	3 Filer ID
4 Date 06/17/2021	5 Payee name Office Depot	
6 Amount (\$) \$23.27	7 Payee address; City; State; Zip Code 1401 N Loop W, Houston, TX 77008	
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 Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/30/2021	Candidate/Officeholder name Paypal	Office sought Office held
Amount (\$) \$7.74	Payee address; City; State; Zip Code 2211 N. 1st Street San Jose, CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/27/2021	Candidate/Officeholder name Planned Parenthood Gulf Coast	Office sought Office held
Amount (\$) \$20.00	Payee address; City; State; Zip Code 4600 Gulf Fwy Houston, TX 77023	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sustaining membership
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/25 Rpt: 31/36	2 FILER NAME Burgess, Marilyn	3 Filer ID
4 Date 02/27/2021	5 Payee name Planned Parenthood Gulf Coast	
6 Amount (\$) \$20.00	7 Payee address; City; State; Zip Code 4600 Gulf Fwy Houston, TX 77023	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense sustaining membership
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 03/27/2021	Payee name Planned Parenthood Gulf Coast	
Amount (\$) \$20.00	Payee address; City; State; Zip Code 4600 Gulf Fwy Houston, TX 77023	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense sustaining membership
Complete ONLY if direct expenditure to benefit C/OH		
Date 05/27/2021	Payee name Planned Parenthood Gulf Coast	
Amount (\$) \$20.00	Payee address; City; State; Zip Code 4600 Gulf Fwy Houston, TX 77023	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense sustaining membership
Complete ONLY if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 21/25 Rpt: 32/36	2 FILER NAME Burgess, Marilyn	3 Filer ID
4 Date 05/27/2021	5 Payee name Planned Parenthood Gulf Coast	
6 Amount (\$) \$20.00	7 Payee address; City; State; Zip Code 4600 Gulf Fwy Houston, TX 77023	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sustaining membership
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/27/2021	Payee name Planned Parenthood Gulf Coast	
Amount (\$) \$20.00	Payee address; City; State; Zip Code 4600 Gulf Fwy Houston, TX 77023	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sustaining membership
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/24/2021	Payee name Print N Sign	
Amount (\$) \$541.25	Payee address; City; State; Zip Code 7350 Harwin Dr Ste 316A Houston, TX 77036	
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 100 campaign signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/25 Rpt: 33/36	2 FILER NAME Burgess, Marilyn	3 Filer ID
4 Date 06/22/2021	5 Payee name TNT Shirt	
6 Amount (\$) \$649.50	7 Payee address; City; State; Zip Code 2400 Taft Houston, TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense 75 t-shirts
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 06/17/2021	Candidate/Officeholder name Payee name Target	
Amount (\$) \$90.91	Payee address; City; State; Zip Code 2580 Shearn Houston, TX 77007	
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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense staff appreciation Party supplies
Complete ONLY if direct expenditure to benefit C/OH		
Date 01/11/2021	Candidate/Officeholder name Payee name Texas Freedom Network	
Amount (\$) \$100.00	Payee address; City; State; Zip Code PO Box 1624 Austin, TX 78767	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense donation
Complete ONLY if direct expenditure to benefit C/OH		
Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 23/25 Rpt: 34/36	2 FILER NAME Burgess, Marilyn	3 Filer ID
4 Date 06/12/2021	5 Payee name The Goose Acre	
6 Amount (\$) \$97.52	7 Payee address; City; State; Zip Code 21 Waterway The Woodlands, TX 77380	
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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Food & Beverage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/20/2021	Payee name Total Wine & More	
Amount (\$) \$36.78	Payee address; City; State; Zip Code 2857 Katy Freeway, Suite100 Houston, TX 77007	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense JRR watch party refreshments
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/25/2021	Payee name U of H Friends of Women's Studies	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 624 Agnes Arnold Hall Houston, TX 77204	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense membership
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 24/25 Rpt: 35/36		2 FILER NAME Burgess, Marilyn		3 Filer ID
4 Date 01/15/2021	5 Payee name USPS			
6 Amount (\$) \$46.00	7 Payee address; City; State; Zip Code 1300 W. 19th St Houston, TX 77008			
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 PO box rental	
9 Complete ONLY if direct expenditure to benefit C/OH				
Candidate/Officeholder name Office sought Office held				
Date 06/03/2021	Payee name USPS			
Amount (\$) \$60.55	Payee address; City; State; Zip Code 1300 W. 19th St Houston, TX 77008			
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 postage	
Complete ONLY if direct expenditure to benefit C/OH				
Candidate/Officeholder name Office sought Office held				
Date 05/25/2021	Payee name Uber			
Amount (\$) \$16.95	Payee address; City; State; Zip Code 1515 3rd Street San Francisco, CA 94158			
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 trip to Houston Young Professionals	
Complete ONLY if direct expenditure to benefit C/OH				
Candidate/Officeholder name Office sought Office held				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 25/25 Rpt: 36/36	2 FILER NAME Burgess, Marilyn	3 Filer ID
4 Date 05/25/2021	5 Payee name Uber	
6 Amount (\$) \$14.19	7 Payee address; City; State; Zip Code 1515 3rd Street San Francisco, CA 94158	
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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense trip to Houston Young Professionals
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held