


Official Filing Authority of Harris County
Isabel Longoria
Elections Administrator

Campaign Finance Report




Elections Administrator
Harris County, TX

FileNo: 2022125
Received By Clerk: 01/18/2022
File Date: January 18, 2022
Office: District Clerk
Candidate: Broadnax, Desiree N.
Treasurer: Franklin, Tangela
Category: Contributions And Expenditures (COH/JCOH)
Delivered By: Electronically Filed
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 Filers)		2 Total pages filed: 28									
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mrs. Desiree N. <hr/> NICKNAME LAST SUFFIX Broadnax			OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">Receipt #</td> <td style="width:50%;">Amount \$</td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> </table>		Receipt #	Amount \$	Date Processed		Date Imaged			
	Receipt #	Amount \$											
Date Processed													
Date Imaged													
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7334 Liberty Ridge Lane Houston TX 77049 <input type="checkbox"/> Change of Address													
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (281) 744-8725												
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Tangela <hr/> NICKNAME LAST SUFFIX Franklin												
	7 CAMPAIGN TREASURER ADDRESS STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 7354 Weyburn St Houston TX 77028 (Residence or Business)												
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (832) 229-3995												
9 REPORT TYPE	<table style="width:100%;"> <tr> <td><input checked="" type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded Modified Reporting Limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>					<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)
<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)										
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10 PERIOD COVERED	<table style="width:100%;"> <tr> <td>Month Day Year</td> <td>THROUGH</td> <td>Month Day Year</td> </tr> <tr> <td>7 / 1 / 2021</td> <td></td> <td>12 / 31 / 2021</td> </tr> </table>					Month Day Year	THROUGH	Month Day Year	7 / 1 / 2021		12 / 31 / 2021		
Month Day Year	THROUGH	Month Day Year											
7 / 1 / 2021		12 / 31 / 2021											
11 ELECTION	ELECTION DATE Month Day Year 3 / 1 / 2021		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special										
	12 OFFICE OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) Harris County District Clerk										
14 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. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.												
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME <hr/> COMMITTEE ADDRESS <hr/> COMMITTEE CAMPAIGN TREASURER NAME <hr/> COMMITTEE CAMPAIGN TREASURER ADDRESS <hr/>											

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 1360.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 9649.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 9538.81
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 110.19
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

18 SIGNATURE 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.


Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

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

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

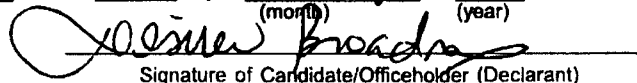
OR

(2) Unsworn Declaration

My name is Desiree Broadnax, and my date of birth is May 30, 1971.

My address is 7334 Liberty Ridge Lane, Houston, TX, 77049, USA.
(street) (city) (state) (zip code) (country)

Executed in Harris County, State of Texas, on the 17th day of January, 20 22.
(month) (year)


Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3****19 FILER NAME****20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE****SUBTOTAL
AMOUNT**

- | | | | |
|-----|-------------------------------------|--|------------|
| 1. | <input checked="" type="checkbox"/> | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 9649.00 |
| 2. | <input type="checkbox"/> | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 3. | <input type="checkbox"/> | SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input checked="" type="checkbox"/> | SCHEDULE E: LOANS | \$ 4502.59 |
| 5. | <input checked="" type="checkbox"/> | SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ 9538.81 |
| 6. | <input type="checkbox"/> | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 7. | <input type="checkbox"/> | SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. | <input type="checkbox"/> | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 9. | <input checked="" type="checkbox"/> | SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS | \$ |
| 10. | <input type="checkbox"/> | SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. | <input type="checkbox"/> | SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. | <input type="checkbox"/> | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: 18	
2 FILER NAME Desiree Broadnax				3 Filer ID (Ethics Commission Filers)	
4 Date 09/07/2021	5 Full name of contributor Erica Arimonyeotu out-of-state PAC (ID#: _____)			7 Amount of contribution (\$) \$25.00	
6 Contributor address; City; State; Zip Code 14726 Wynbourn Way Houston TX 77083					
8 Principal occupation / Job title (See Instructions) CEO			9 Employer (See Instructions) Self Employed		
Date 09/08/2021	Full name of contributor Aundrey Broadnax out-of-state PAC (ID#: _____)			Amount of contribution (\$) \$5.00	
Contributor address; City; State; Zip Code 7334 Liberty Ridge Lane Houston TX 77049					
Principal occupation / Job title (See Instructions) Driver			Employer (See Instructions) Uber		
Date 09/09/2021	Full name of contributor Elliot Moutra out-of-state PAC (ID#: _____)			Amount of contribution (\$) \$100.00	
Contributor address; City; State; Zip Code 10302 Cathedral Houston Tx 77051					
Principal occupation / Job title (See Instructions) Teacher			Employer (See Instructions) HISD		
Date 09/09/2021	Full name of contributor Levonika Jackson out-of-state PAC (ID#: _____)			Amount of contribution (\$) \$25.00	
Contributor address; City; State; Zip Code 1901 Post Oak Blvd #1403 Houston TX 77056					
Principal occupation / Job title (See Instructions) Nurse Practitioner			Employer (See Instructions) Genesis Health		
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**

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Desiree Broadnax		3 Filer ID (Ethics Commission Filers)
4 Date 7/19/2021	5 Full name of contributor Gina Guillory out-of-state PAC (ID#): 6 Contributor address; 10610 Country Squire Blvd City; Baytown State; TX Zip Code 77521	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Government		9 Employer (See Instructions) City of Baytown
Date 7/20/2021	Full name of contributor Ty Watts out-of-state PAC (ID#): Contributor address; 12999 FM 529 City; Houston State; TX Zip Code 77041	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions) RFW Church
Date 7/19/2021	Full name of contributor Sterling Felder out-of-state PAC (ID#): Contributor address; 2812 Landmark Dr. City; Baytown State; TX Zip Code 77520	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 7/20/2021	Full name of contributor Bridget Brumfield out-of-state PAC (ID#): Contributor address; 3506 Teal Lane City; Houston State; TX Zip Code 77047	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: 18	
2 FILER NAME Desiree Broadnax				3 Filer ID (Ethics Commission Filers)	
4 Date 09/09/2021		5 Full name of contributor Lisa Broome out-of-state PAC (ID#: _____)		7 Amount of contribution (\$) \$200.00	
		6 Contributor address; City; State; Zip Code 21311 Penshore Place Ln Katy TX 77450			
8 Principal occupation / Job title (See Instructions) NP			9 Employer (See Instructions) HMH		
Date 09/09/2021		Full name of contributor Stacy San Lucas out-of-state PAC (ID#: _____)		Amount of contribution (\$) \$25.00	
		Contributor address; City; State; Zip Code 11839 Trinity Bluff Lane Cypress TX 77433			
Principal occupation / Job title (See Instructions) ACNP			Employer (See Instructions) HMH		
Date 09/27/2021		Full name of contributor Shirley Blake out-of-state PAC (ID#: _____)		Amount of contribution (\$) \$100.00	
		Contributor address; City; State; Zip Code 2318 Gardenia St Houston Tx 77562			
Principal occupation / Job title (See Instructions) Not Employed			Employer (See Instructions) Not Employed		
Date 10/23/2021		Full name of contributor Marcus Anders out-of-state PAC (ID#: _____)		Amount of contribution (\$) \$50.00	
		Contributor address; City; State; Zip Code 5204 Sandy Meadow Lane League City TX 77573			
Principal occupation / Job title (See Instructions) Mortgage			Employer (See Instructions) Phh		
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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Desiree Broadnax		3 Filer ID (Ethics Commission Filers)
4 Date 7/30/2021	5 Full name of contributor Lisa Blake out-of-state PAC (ID#): 6 Contributor address; City; State; Zip Code 1810 Macondray Dr. Humble TX 77396	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 8/2/2021	Full name of contributor Minerva Barrera out-of-state PAC (ID#): Contributor address; City; State; Zip Code 3327 Vintage View Ln. Pearland TX 77584	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Log Manager		Employer (See Instructions) Harris County
Date 8/9/2021	Full name of contributor Salina Bradley out-of-state PAC (ID#): Contributor address; City; State; Zip Code 15330 Liberty River Dr. Apt. 7203 Houston TX 77049	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Log Manager		Employer (See Instructions) Harris County
Date 8/9/2021	Full name of contributor Bert Moore out-of-state PAC (ID#): Contributor address; City; State; Zip Code 2810 Marty Ln. Shreveport, LA 71119	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Desiree Broadnax		3 Filer ID (Ethics Commission Filers)
4 Date 10/23/2021	5 Full name of contributor Gina Guillory out-of-state PAC (ID#): 6 Contributor address; 10610 Country Squire Blvd Baytown TX 77521 City; TX State; TX Zip Code 77521	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Government		9 Employer (See Instructions) City Of Baytown
Date 10/23/2021	Full name of contributor William Jeter out-of-state PAC (ID#): Contributor address; 4202 Cinnamon Street Baytown TX 77521 City; TX State; TX Zip Code 77521	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Hazmat Mgr		Employer (See Instructions) Alara Logistics
Date 10/23/2021	Full name of contributor Jessica Alvarez out-of-state PAC (ID#): Contributor address; 8930 Friendly Houston TX 77093 City; TX State; TX Zip Code 77093	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Aldine ISD
Date 10/23/2021	Full name of contributor Randy Vasquez out-of-state PAC (ID#): Contributor address; 18107 Svensson Slade Ln Houston TX 77044 City; TX State; TX Zip Code 77044	Amount of contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Supervisor		Employer (See Instructions) FED EX
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**

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Desiree Broadnax		3 Filer ID (Ethics Commission Filers)
4 Date 7/10/2021	5 Full name of contributor Wonda Thomas out-of-state PAC (ID#): 6 Contributor address; City; State; Zip Code Barbershill Road Highlands TX 77562	7 Amount of contribution (\$) \$750.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/29/2021	Full name of contributor Harold Thomas out-of-state PAC (ID#): Contributor address; City; State; Zip Code 6001 Willow Pearland, TX 77584	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Operator		Employer (See Instructions) Lubrizol
Date 8/9/2021	Full name of contributor Jim Leitner out-of-state PAC (ID#): Contributor address; City; State; Zip Code 1301 Franklin Houston, TX 77002	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/9/2021	Full name of contributor Heron Thomas out-of-state PAC (ID#): Contributor address; City; State; Zip Code 1921 Barbers Hill Road Highlands TX 77562	Amount of contribution (\$) \$144.00
Principal occupation / Job title (See Instructions)		Employer (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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Desiree Broadnax		3 Filer ID (Ethics Commission Filers)
4 Date 7/10/2021	5 Full name of contributor Traci Bennett out-of-state PAC (ID#): 6 Contributor address; City; State; Zip Code Fox Bend Lane Missouri City TX 77459	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 9/9/2021	Full name of contributor Michelle Wilhelm out-of-state PAC (ID#): Contributor address; City; State; Zip Code 1301 Franklin Houston, TX 77002	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/7/2021	Full name of contributor Dayne Thomas out-of-state PAC (ID#): Contributor address; City; State; Zip Code 263 Palma Noce San Antonio TX 78253	Amount of contribution (\$) \$350.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/29/2021	Full name of contributor Traci Bennett out-of-state PAC (ID#): Contributor address; City; State; Zip Code Fox Bend Lane Missouri City TX 77459	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Desiree Broadnax		3 Filer ID (Ethics Commission Filers)
4 Date 11/15/2021	5 Full name of contributor Sean Powers Realty out-of-state PAC (ID#): 6 Contributor address; 700 Rollingbrook Ste C City; Baytown State; TX Zip Code 77521	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/22/2021	Full name of contributor Ruth Burton out-of-state PAC (ID#): Contributor address; 3435 Wentworth City; Houston State; TX Zip Code 77004	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 7/19/2021	Full name of contributor Nichelle Poindexter out-of-state PAC (ID#): Contributor address; 2316 Sperber Ln. City; Houston State; TX Zip Code 77003	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/20/2021	Full name of contributor Reginald Lee out-of-state PAC (ID#): Contributor address; 1424 Rim Side Tri City; Houston State; TX Zip Code 77045	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: 18	
2 FILER NAME Desiree Broadnax				3 Filer ID (Ethics Commission Filers)	
4 Date 10/27/2021	5 Full name of contributor Regina Molden out-of-state PAC (ID#):			7 Amount of contribution (\$) \$25.00	
6 Contributor address; 9634 Rapid River Lane Houston TX 77086			City; State; Zip Code		
8 Principal occupation / Job title (See Instructions) Not Employed			9 Employer (See Instructions) Not Employed		
Date 10/27/2021	Full name of contributor Eric Prince out-of-state PAC (ID#):			Amount of contribution (\$) \$100.00	
Contributor address; 12605 Bethany Bay Dr Pearland TX 77584			City; State; Zip Code		
Principal occupation / Job title (See Instructions) Attorney			Employer (See Instructions) Harris County		
Date 10/28/2021	Full name of contributor Latrice Merchant out-of-state PAC (ID#):			Amount of contribution (\$) \$100.00	
Contributor address; 4410 Longhorn Dr Baytown TX 77521			City; State; Zip Code		
Principal occupation / Job title (See Instructions) Chef			Employer (See Instructions) Dotae's Catering		
Date 10/28/2021	Full name of contributor Shantel Dieudonne out-of-state PAC (ID#):			Amount of contribution (\$) \$50.00	
Contributor address; 3526 Red Cedar Dr Baytown TX 77521			City; State; Zip Code		
Principal occupation / Job title (See Instructions) Customer Service Rep			Employer (See Instructions) Anthem		
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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: 18	
2 FILER NAME Desiree Broadnax				3 Filer ID (Ethics Commission Filers)	
4 Date 10/28/2021		5 Full name of contributor Shanrhonda Williams out-of-state PAC (ID#):		7 Amount of contribution (\$) \$100.00	
		6 Contributor address; City; State; Zip Code 13427 Castilian Dr. Houston TX 77015			
8 Principal occupation / Job title (See Instructions) Materials Manager			9 Employer (See Instructions) USPI		
Date 10/31/2021		Full name of contributor Sean Broadnax out-of-state PAC (ID#):		Amount of contribution (\$) \$100.00	
		Contributor address; City; State; Zip Code 14015 Inland Hill St Houston TX 77045			
Principal occupation / Job title (See Instructions) Sales			Employer (See Instructions) Sed		
Date 11/16/2021		Full name of contributor Joseph Williams out-of-state PAC (ID#):		Amount of contribution (\$) \$100.00	
		Contributor address; City; State; Zip Code 1823 Sonoma Breeze Dr. Houston TX 77049			
Principal occupation / Job title (See Instructions) Self Employed			Employer (See Instructions) Barbershop		
Date 11/17/2021		Full name of contributor Connie Wallace out-of-state PAC (ID#):		Amount of contribution (\$) \$100.00	
		Contributor address; City; State; Zip Code 5212 Whispering Oaks Dallas TX 75236			
Principal occupation / Job title (See Instructions) Educator			Employer (See Instructions) Duncanville ISD		
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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Desiree Broadnax		3 Filer ID (Ethics Commission Filers)
4 Date 11/28/2021	5 Full name of contributor Racquel Hart out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code 7702 Waterchase Dr Missouri City TX 77489	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Admin		9 Employer (See Instructions) Harris County
Date 11/28/2021	Full name of contributor Regina Sims out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 1107 Stevenage lane Channelview TX 77530	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) School District
Date 11/29/2021	Full name of contributor Charita Williams out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 1116 Lilac Lane Desoto TX 75115	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Dealer Analyst		Employer (See Instructions) Nissan Motors
Date 11/30/2021	Full name of contributor Alicia Thomas out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 1596 Cherry Blossom Court Brentwood CA 94513	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Stanford
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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Desiree Broadnax		3 Filer ID (Ethics Commission Filers)
4 Date 12/23/2021	5 Full name of contributor out-of-state PAC (ID# _____) Enos Burton 6 Contributor address; City; State; Zip Code 922 Earlsferry Channelview TX 77530	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 7/19/2021	Full name of contributor out-of-state PAC (ID# _____) Andrea Molette Contributor address; City; State; Zip Code 1400 McKinney St. #2210 Houston TX 77010	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 7/19/2021	Full name of contributor out-of-state PAC (ID# _____) Benny Langley Contributor address; City; State; Zip Code 1350 IH 35 N San Marcos TX 77666	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/20/2021	Full name of contributor out-of-state PAC (ID# _____) Veronique Connor Contributor address; City; State; Zip Code 1730 Wind Trace Ct Sugarland TX 77479	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Desiree Broadnax		3 Filer ID (Ethics Commission Filers)
4 Date 9/10/2021	5 Full name of contributor Sherard Ellis out-of-state PAC (ID#): 6 Contributor address; 4437 Live Oak St. City; Houston TX State; Zip Code 77004	7 Amount of contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 9/29/2021	Full name of contributor Rhonda Johnson out-of-state PAC (ID#): Contributor address; 2103 Peachwood Dr. Missouri City TX City; 77004 State; Zip Code	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/2/2021	Full name of contributor Yvette Everett out-of-state PAC (ID#): Contributor address; 4417 Brandon Ln Middletown OH City; 45042 State; Zip Code	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/11/2021	Full name of contributor Michelle Beck out-of-state PAC (ID#): Contributor address; 25030 Suncreek Lane Pearland TX City; 77584 State; Zip Code	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (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**

If the requested information is not applicable, DO NOT include this page in the report.

The instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Desiree Broadnax		3 Filer ID (Ethics Commission Filers)
4 Date 11/17/2021	5 Full name of contributor Kelli Murray out-of-state PAC (ID#): 6 Contributor address; 17434 Courtney Pine Circle City; Spring State; TX Zip Code 77379	7 Amount of contribution (\$) \$20.00
8 Principal occupation / Job title (See instructions)		9 Employer (See instructions)
Date 9/9/2021	Full name of contributor Eugene Newsome out-of-state PAC (ID#): Contributor address; 4910 Winding Timbers Cir City; Humble State; TX Zip Code 77346	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 9/9/2021	Full name of contributor Lori Gooch out-of-state PAC (ID#): Contributor address; 12434 Brazos Bend Trail City; Humble State; TX Zip Code 77346	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date 9/9/2021	Full name of contributor Harold Thomas out-of-state PAC (ID#): Contributor address; 1921 Barbershill Rd City; Highlands State; TX Zip Code 77562	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See instructions)		Employer (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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Desiree Broadnax		3 Filer ID (Ethics Commission Filers)
4 Date 7/19/2021	5 Full name of contributor Dayne Thomas out-of-state PAC (ID#): 6 Contributor address; City; State; Zip Code 263 Palma Noce San Antonio TX 78253	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 8/19/2021	Full name of contributor Dayne Thomas out-of-state PAC (ID#): Contributor address; City; State; Zip Code 263 Palma Noce San Antonio TX 78253	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 9/19/2021	Full name of contributor Dayne Thomas out-of-state PAC (ID#): Contributor address; City; State; Zip Code 263 Palma Noce San Antonio TX 78253	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2021	Full name of contributor Dayne Thomas out-of-state PAC (ID#): Contributor address; City; State; Zip Code 263 Palma Noce San Antonio TX 78253	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) N/A
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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Desiree Broadnax		3 Filer ID (Ethics Commission Filers)
4 Date 8/19/2021	5 Full name of contributor Doshia Burton out-of-state PAC (ID#: 6 Contributor address; City; State; Zip Code 3774 NE Alameda St Portland OR 97212	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/28/2021	Full name of contributor Earl Thomas out-of-state PAC (ID#: Contributor address; City; State; Zip Code 9706 Logans Ridge Dr. Converse TX 78109	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/19/2021	Full name of contributor Wonda Thomas out-of-state PAC (ID#: Contributor address; City; State; Zip Code 1921 Barbershill Road Highlands TX 77562	Amount of contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/28/2021	Full name of contributor Harold Thomas out-of-state PAC (ID#: Contributor address; City; State; Zip Code 6001 Willow Pearland TX 77584	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (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**

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Desiree Broadnax		3 Filer ID (Ethics Commission Filers)
4 Date 11/19/2021	5 Full name of contributor out-of-state PAC (ID#: Dayne Thomas 6 Contributor address; City; State; Zip Code 263 Palma Noce San Antonio TX 78253	7 Amount of contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/19/2021	Full name of contributor out-of-state PAC (ID#: Dayne Thomas Contributor address; City; State; Zip Code 263 Palma Noce San Antonio TX 78253	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 7/28/2021	Full name of contributor out-of-state PAC (ID#: Andrew Haynes Contributor address; City; State; Zip Code 15202 Poplar Springs Lane Houston TX 77062	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 8/28/2021	Full name of contributor out-of-state PAC (ID#: Andrew Haynes Contributor address; City; State; Zip Code 15202 Poplar Springs Lane Houston TX 77062	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (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**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18
2 FILER NAME Desiree Broadnax		3 Filer ID (Ethics Commission Filers)
4 Date 9/28/2021	5 Full name of contributor out-of-state PAC (ID#: Andrew Haynes 6 Contributor address; City; State; Zip Code 15202 Poplar Springs Lane Houston TX 77062	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/28/2021	Full name of contributor out-of-state PAC (ID#: Andrew Haynes Contributor address; City; State; Zip Code 15202 Poplar Springs Lane Houston TX 77062	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/28/2021	Full name of contributor out-of-state PAC (ID#: Andrew Haynes Contributor address; City; State; Zip Code 15202 Poplar Springs Lane Houston TX 77062	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/28/2021	Full name of contributor out-of-state PAC (ID#: Andrew Haynes Contributor address; City; State; Zip Code 15202 Poplar Springs Lane Houston TX 77062	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) N/A
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

LOANS**SCHEDULE E**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 2
2 FILER NAME Desiree Broadnax		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0
5 Date of loan 7/18/2021	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Desiree Broadnax	9 Loan Amount (\$) \$600
6 Is lender a financial institution? Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	8 Lender address; City; State; Zip Code 7334 Liberty Ridge Ln. Houston TX 77049	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See Instructions) Division Manager		13 Employer (See Instructions) Harris County
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan 7/31/2021	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Desiree Broadnax	Loan Amount (\$) \$600.00
Is lender a financial institution? Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Lender address; City; State; Zip Code 7334 Liberty Ridge Lane Houston TX 77049	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions) Division Manager		Employer (See Instructions) Harris County
Description of Collateral <input checked="" type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.		

LOANS**SCHEDULE E**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 2
2 FILER NAME Desiree Broadnax		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0
5 Date of loan 12/7/2021	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Desiree Broadnax	9 Loan Amount (\$) \$500
6 Is lender a financial institution? Y NX	8 Lender address; City; State; Zip Code 7334 Liberty Ridge Ln. Houston TX 77049	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See Instructions) Division Manager		13 Employer (See Instructions) Harris County
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan 12-10-2021	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Desiree Broadnax	Loan Amount (\$) 2802.59
Is lender a financial institution? Y NX	Lender address; City; State; Zip Code 7334 Liberty Ridge Lane Houston TX 77049	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions) Division Manager		Employer (See Instructions) Harris County
Description of Collateral <input checked="" type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

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: 5		2 FILER NAME Desiree Broadnax		3 Filer ID (Ethics Commission Filers)	
4 Date 9/1/2021		5 Payee name Antron Johnson			
6 Amount (\$) \$1000.00		7 Payee address; City; State; Zip Code 1034 Sauliner St. Houston, TX 77019			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting expense		(b) Description Campaign Services		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 10/1/2021		Payee name Antron Johnson			
Amount (\$) \$700.00		Payee address; City; State; Zip Code 1034 Sauliner St. Houston TX 77019			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting expense		Description Campaign Services		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 11/3/2021		Payee name Antron Johnson			
Amount (\$) \$1200		Payee address; City; State; Zip Code 1034 Sauliner St. Houston TX 77019			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting expense		Description Campaign Services		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 5	2 FILER NAME Desiree Broadnax	3 Filer ID (Ethics Commission Filers)
4 Date 12/3/2021	5 Payee name Antron Johnson	
6 Amount (\$) \$1200.00	7 Payee address; City; State; Zip Code 1034 Sauliner St. Houston, TX 77019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting expense	(b) Description Campaign Services
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/15/2021	Payee name Harris County Democratic Party	
Amount (\$) \$625.00	Payee address; City; State; Zip Code 4619 Lyons Ave. Houston TX 77020	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate	Description Contribution to Democratic Party
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/18/2021	Payee name Harris County Democratic Party	
Amount (\$) \$1250	Payee address; City; State; Zip Code 4619 Lyons Ave. Houston TX 77020	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate	Description Contribution to Democratic Party
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 5		2 FILER NAME Desiree Broadnax		3 Filer ID (Ethics Commission Filers)	
4 Date 8/12/2021		5 Payee name M3 Graphics			
6 Amount (\$) \$325		7 Payee address; City; State; Zip Code 11730 S. Wilcrest Houston TX 77099			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense		(b) Description Campaign Push Cards		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH					
Date 10/20/2021		Payee name Texas Screen/ T-shirt King			
Amount (\$) \$324.75		Payee address; City; State; Zip Code 7798 Harwin Dr. Houston TX 77036			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense		Description Campaign t-shirts		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH					
Date 10/25/2021		Payee name Texas Screen/T-shirt King			
Amount (\$) \$324.75		Payee address; City; State; Zip Code 7798 Harwin Dr. Houston TX 77036			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense		Description Campaign t-shirts		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 5		2 FILER NAME Desiree Broadnax		3 Filer ID (Ethics Commission Filers)	
4 Date 12/18/2021		5 Payee name KWWJ 1360AM			
6 Amount (\$) \$450.00		7 Payee address; City; State; Zip Code 4638 Decker Dr. Baytown TX 77520			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense		(b) Description Radio commercial		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 12/23/2021		Payee name Radio One			
Amount (\$) \$730.00		Payee address; City; State; Zip Code 24 Greenway Plaza Ste 900 Houston TX 77046			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense		Description Radio commercial		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 11/13/2021		Payee name Texas Victory Consulting			
Amount (\$) \$150.00		Payee address; City; State; Zip Code 1034 Sauliner Street Houston TX 77019			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food beverage expense		Description Food for seniors		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 5		2 FILER NAME Desiree Broadnax		3 Filer ID (Ethics Commission Filers)	
4 Date 8/1/2021		5 Payee name Antron Johnson			
6 Amount (\$) \$1200.00		7 Payee address; 1034 Sauliner St. Houston, TX 77019		City: State: Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting expense		(b) Description Campaign Services		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 11/15/2021		Payee name Actblue Texas			
Amount (\$) 41.52		Payee address; PO Box 441146 Someville MA 02144		City: State: Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description Electronic Contribution Fees		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 12/10/2021		Payee name Actblue Texas			
Amount (\$) \$17.79		Payee address; PO Box 441146 Someville MA 02144		City: State: Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description Electronic Contribution Fees		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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