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Official Filing Authority of Harris County
Beth Stevens
Interim Elections Administrator

Campaign Finance Report



B. Stevens

Interim Elections Administrator
Harris County, TX

FileNo: 2022414
Received By Clerk: 07/13/2022
File Date: July 13, 2022
Office: District Clerk
Candidate: Burgess, Marilyn
Treasurer: Bachand-Halvorson, Jennifer
Category: Contributions And Expenditures (COH / JCOH)
Delivered By: Personal Appearance
Type: COR

Harris County No Fee

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1. Filer ID (Ethics Commission Filers)		2. Total pages filed: 30	
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR	FIRST	MI		
	NICKNAME	LAST	SUFFIX		
<div> <div>4 CANDIDATE/ OFFICEHOLDER MAILING ADDRESS</div> <div> <div>ADDRESS /PO BOX: APT/SUITE # CITY STATE: ZIP CODE</div> <div>PO Box 7235 HOUSTON TX 77248</div> </div> <div> <input type="checkbox"/> Change of Address </div> </div>					
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
6 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI		
	NICKNAME	LAST	SUFFIX		
<div> <div>7 CAMPAIGN TREASURER ADDRESS (Residence or Business)</div> <div> <div>STREET ADDRESS (NO PO BOX PLEASE): APT/SUITE # CITY STATE: ZIP CODE</div> <div>1013 W Ellaine Ave Pasadena TX 77506</div> </div> </div>					
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
<div> <div>9 REPORT TYPE</div> <div> <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) </div> <div> <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- COH-FR) </div> </div>					
10 PERIOD COVERED	Month	Day	Year	THROUGH	Month
<div> <div>11 ELECTION</div> <div> <div>ELECTION DATE</div> <div>Month Day Year</div> <div>02/20/2022</div> </div> <div> <div>ELECTION TYPE</div> <div> <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other </div> <div> <input checked="" type="checkbox"/> General <input type="checkbox"/> Special </div> </div> </div>					
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)	
Other Office: Harris County Di			Other Office: Harris County Di		
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.				
	COMMITTEE TYPE		COMMITTEE NAME		
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC		COMMITTEE ADDRESS		
			COMMITTEE CAMPAIGN TREASURER NAME		
			COMMITTEE CAMPAIGN TREASURER ADDRESS		
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

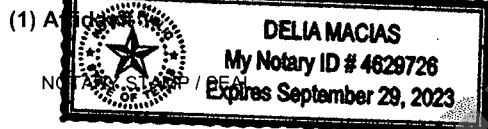
FORM C/OH COVER SHEET PG 2

15 C/OH NAME	Marilyn Burgess		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS EXPENDITURE TOTALS CONTRIBUTION BALANCE OUTSTANDING LOAN TOTALS	1	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$460.00
	2	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$16,070.00
	3	TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$842.70
	4	TOTAL POLITICAL EXPENDITURES	\$15,864.85
	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$15,049.49
	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$5,207.41

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.

Marilyn Burgess
Signature of Candidate or Officeholder

Please complete either option below:



Sworn to and subscribed before me, by the said Marilyn Burgess this the 12th day of July 20 22 to certify which, witness my hand and seal of office.

Delia N. Macias Delia N. Macias Notary
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____

My address is _____
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____ on the _____ day of _____ 20 _____
(month) (year)

Signature of Candidate/Officeholder (Declarant)

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

19. FILER NAME Marilyn Burgess	20. FILER ID (Ethics Commission Filers)
21. SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTALS AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$14,970.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$1,100.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$0.00
4. SCHEDULE E: LOANS	\$5,207.41
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$5,735.12
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$0.00
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$0.00
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$4,874.50
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$5,255.23
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$0.00
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$0.00
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIBUTIONS RETURNED TO FILER	\$0.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Marilyn Burgess		3. Filer ID (Ethics Commission Filers)
4. Date 03/19/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Plumbers Local Union # 68 6. Contributor address; City; State; ZIP Code PO Box 8746 Houston, TX 77249-8746	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 04/14/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC IBEW PAC Voluntary Fund 6. Contributor address; City; State; ZIP Code 1475 North Loop W Houston, TX 77008-1651	7. Amount of contribution (\$) \$1,500.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 05/23/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Haynes & Boone, LLP 6. Contributor address; City; State; ZIP Code 2323 Victory Avenue Ste 700 Dallas, TX 75219-7672	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 05/23/2022	5. Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC Susman Godfrey LLP 6. Contributor address; City; State; ZIP Code 1000 Louisiana St Ste 5100 Houston, TX 77002-5091	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 05/31/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Bracewell PAC 6. Contributor address; City; State; ZIP Code 711 Louisiana St Ste 2300 Houston, TX 77002-2770	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions)		9 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

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Marilyn Burgess		3. Filer ID (Ethics Commission Filers)
4. Date 06/16/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Vinson & Elkins Political Action Committee 6. Contributor address; City; State; ZIP Code 1001 Fannin St Ste 2500 Houston, TX 77002-6710	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 06/05/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Jan and Bob Adam 6. Contributor address; City; State; ZIP Code 1807 Sand Hollow Ln Katy, TX 77450-5224	7. Amount of contribution (\$) \$150.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 06/07/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Karen Adam 6. Contributor address; City; State; ZIP Code 1022 Nicholson St Houston, TX 77008-6752	7. Amount of contribution (\$) \$150.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 06/07/2022	5. Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC Karen Adam 6. Contributor address; City; State; ZIP Code 1022 Nicholson St Houston, TX 77008-6752	7. Amount of contribution (\$) \$150.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 03/04/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC DENISE BROWN 6. Contributor address; City; State; ZIP Code 1300 McGowen St Ste 250 Houston, TX 77004-1141	7. Amount of contribution (\$) \$150.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Marilyn Burgess		3. Filer ID (Ethics Commission Filers)
4. Date 03/08/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Misty Brown 6. Contributor address; City; State; ZIP Code 17807 Springtree Dr Humble, TX 77396-1639	7. Amount of contribution (\$) \$25.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 04/08/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Misty Brown 6. Contributor address; City; State; ZIP Code 17807 Springtree Dr Humble, TX 77396-1639	7. Amount of contribution (\$) \$25.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 05/08/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Misty Brown 6. Contributor address; City; State; ZIP Code 17807 Springtree Dr Humble, TX 77396-1639	7. Amount of contribution (\$) \$25.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 06/08/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Misty Brown 6. Contributor address; City; State; ZIP Code 17807 Springtree Dr Humble, TX 77396-1639	7. Amount of contribution (\$) \$25.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 06/09/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Misty Brown 6. Contributor address; City; State; ZIP Code 17807 Springtree Dr Humble, TX 77396-1639	7. Amount of contribution (\$) \$60.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Marilyn Burgess		3. Filer ID (Ethics Commission Filers)
4. Date 06/02/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Burford Perry LLP 6. Contributor address; City; State; ZIP Code 909 Fannin St Ste 2630 Houston, TX 77010-1003	7. Amount of contribution (\$) \$150.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 06/09/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC George Celniker 6. Contributor address; City; State; ZIP Code 1400 Hermann Dr Unit 10G Houston, TX 77004-7137	7. Amount of contribution (\$) \$200.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 04/30/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Marian Cones 6. Contributor address; City; State; ZIP Code 1326 Moorhead Dr Houston, TX 77055-4110	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
4. Date 05/31/2022	5. Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC Marian Cones 6. Contributor address; City; State; ZIP Code 1326 Moorhead Dr Houston, TX 77055-4110	7. Amount of contribution (\$) \$250.00
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
4. Date 06/09/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Moritza Day 6. Contributor address; City; State; ZIP Code 1400 Hermann Dr Unit 5D Houston, TX 77004-7136	7. Amount of contribution (\$) \$150.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Marilyn Burgess		3. Filer ID (Ethics Commission Filers)
4. Date 03/01/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Angie Dozier 6. Contributor address; City; State; ZIP Code 1939 Acaciawood Way Houston, TX 77051-0007	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 06/09/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Angie Dozier 6. Contributor address; City; State; ZIP Code 1939 Acaciawood Way Houston, TX 77051-0007	7. Amount of contribution (\$) \$50.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 06/02/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Marc Ellison 6. Contributor address; City; State; ZIP Code 2211 Norfolk St Houston, TX 77098-4096	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Totz Ellison & Totz, P.C.
4. Date 02/23/2022	5. Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC Reagan Flowers 6. Contributor address; City; State; ZIP Code 2418 Elgin St Houston, TX 77004-3122	7. Amount of contribution (\$) \$150.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 05/09/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Michelle Gaines 6. Contributor address; City; State; ZIP Code 14329 YELLOW BEGONIA Dr Cypress, TX 77433	7. Amount of contribution (\$) \$150.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Marilyn Burgess		3. Filer ID (Ethics Commission Filers)
4. Date 02/21/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Bill Jonson 6. Contributor address; City; State; ZIP Code 12702 Huntington Field Dr Houston, TX 77099-2913	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 05/18/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Bill Jonson 6. Contributor address; City; State; ZIP Code 12702 Huntington Field Dr Houston, TX 77099-2913	7. Amount of contribution (\$) \$150.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 06/09/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Linebarger Groggan Blair & Simpson, LLP 6. Contributor address; City; State; ZIP Code 405 Main St Houston, TX 77002-1837	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 05/24/2022	5. Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC Neal Manne 6. Contributor address; City; State; ZIP Code 1000 Louisiana St Ste 5100 Houston, TX 77002-5091	7. Amount of contribution (\$) \$1,000.00
8. Principal occupation / Job title (See Instructions) lawyer		9 Employer (See Instructions) Susman Godfrey LLP
4. Date 06/09/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Linda Morales 6. Contributor address; City; State; ZIP Code 2 AVENUE OF OAKS St Houston, TX 77009	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Marilyn Burgess		3. Filer ID (Ethics Commission Filers)
4. Date 05/22/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Michele P Mullin 6. Contributor address; City; State; ZIP Code 6910 Yellowstone Way Dr Houston, TX 77054-2531	7. Amount of contribution (\$) \$150.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 06/09/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Carmen Nuncio 6. Contributor address; City; State; ZIP Code 4716 Hain St Houston, TX 77009-3326	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
4. Date 05/18/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Kay Shepard 6. Contributor address; City; State; ZIP Code 1022 Saulnier St Houston, TX 77019-4732	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 06/22/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Lenora Sorola-Pohlman 6. Contributor address; City; State; ZIP Code 2314 Tannehill Dr Houston, TX 77008-3049	7. Amount of contribution (\$) \$100.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4. Date 05/18/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Elizabeth Stern 6. Contributor address; City; State; ZIP Code 3211 Rambling Creek Dr Kingwood, TX 77345-2426	7. Amount of contribution (\$) \$150.00
8. Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A1: not available
2. FILER NAME Marilyn Burgess		3. Filer ID (Ethics Commission Filers)
4. Date 06/09/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Mustafa Tameez 6. Contributor address; City; State; ZIP Code 2727 Allen Pkwy Ste 1300 Houston, TX 77019-2163	7. Amount of contribution (\$) \$2,500.00
8. Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Self Employed
4. Date 05/23/2022	5. Full name of contributor <input type="checkbox"/> out-of-state PAC Ware, Jackson, Lee, O'Neill, Smith & Barrow, LLP 6. Contributor address; City; State; ZIP Code 2929 Allen Pkwy Fl 39 Houston, TX 77019-7100	7. Amount of contribution (\$) \$500.00
8. Principal occupation / Job title (See Instructions)		9 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.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1. Total pages Schedule A2: not available	
2. FILER NAME Marilyn Burgess		3. Filer ID (Ethics Commission Filers)	
4. TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$0.00	
5 Date 06/09/2022	6 Full name of contributor <input type="checkbox"/> out-of-state PAC MG's Catering Services 7 Contributor address; City; State; Zip Code PO Box 1429 Cypress, TX 77429	8 Amount of contribution (\$) \$800.00 <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	9 In-Kind contribution description Catering for fundraiser
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parents (if any) (FOR JUDICIAL)			
5 Date 06/09/2022	6 Full name of contributor <input type="checkbox"/> out-of-state PAC Flash Shockley 7 Contributor address; City; State; Zip Code 15206 Windy Cove Dr Houston, TX 77095-1914	8 Amount of contribution (\$) \$300.00 <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	9 In-Kind contribution description Entertainment
10 Principal occupation / Job Title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parents (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.		1. Total pages Schedule E: not available	
2. FILER NAME Marilyn Burgess		3. Filer ID (Ethics Commission Filers)	
4. TOTAL OF UNITEMIZED LOANS		\$0.00	
5. Date of loan 06/30/2022	7. Name of lender Marilyn Burgess <input type="checkbox"/> out-of-state PAC	9. Loan Amount \$5,207.41	
6. Is lender a financial Institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8. Lender address; City; State; ZIP Code 1240 W 22nd St Houston, TX 77008-1808	10. Interest rate 0.00%	
		11. Maturity date 12/31/2022	
12. Principal occupation / Job title (See Instructions) District Clerk		13. Employer (See Instructions) Harris County	
14. Description of Collateral <input type="checkbox"/> none		15. Check if personal funds were deposited into political account <input checked="" type="checkbox"/>	
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)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Marilyn Burgess	3. Filer ID (Ethics Commission Filers)
4 Date 06/18/2022	5 Payee name Karen Adam	
6 Amount \$150.00	7 Payee address; City: State: Zip Code 1022 Nicholson St Houston, TX 77008-6752	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) OTHER (enter a category not listed above)	(b) Description Refund of duplicate contribution
	<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
4 Date 03/30/2022	5 Payee name Cardmember Services	
6 Amount \$1,101.08	7 Payee address; City: State: Zip Code PO Box 6294 Carol Stream, IL 60197-6294	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Credit Card Total	(b) Description
	<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
4 Date 04/25/2022	5 Payee name Cardmember Services	
6 Amount \$1,271.18	7 Payee address; City: State: Zip Code PO Box 6294 Carol Stream, IL 60197-6294	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Credit Card Total	(b) Description
	<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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

Office Overhead/Rental
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:	2. FILER NAME Marilyn Burgess	3. Filer ID (Ethics Commission Filers)
4 Date 06/16/2022	5 Payee name Cardmember Services	
6 Amount \$2,192.48	7 Payee address; City; State: Zip Code PO Box 6294 Carol Stream, IL 60197-6294	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Credit Card Total	(b) Description
	<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
4 Date 06/09/2022	5 Payee name Charles Falk	
6 Amount \$60.00	7 Payee address; City; State: Zip Code 2007 Little Cedar Dr Kingwood, TX 77339-1712	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising 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	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 05/25/2022	5 Payee name Jessica Ann Artistry	
6 Amount \$250.00	7 Payee address; City; State: Zip Code 4314 Gibson St Unit C Houston, TX 77007-6465	
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	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Marilyn Burgess	3. Filer ID (Ethics Commission Filers)
4 Date 04/12/2022	5 Payee name Jim Kovach	
6 Amount \$125.00	7 Payee address; City; State: Zip Code 5100 Scotland St Houston, TX 77007-7239	
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	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 06/09/2022	5 Payee name Morales Radio Hall	
6 Amount \$400.00	7 Payee address; City; State: Zip Code 111 N Ennis St Houston, TX 77003-1642	
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	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 03/02/2022	5 Payee name Paragon Paymnet Solutions	
6 Amount \$51.74	7 Payee address; City; State: Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
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	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

Office Overhead/Rental
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:	2. FILER NAME Marilyn Burgess	3. Filer ID (Ethics Commission Filers)
4 Date 04/04/2022	5 Payee name Paragon Paymnet Solutions	
6 Amount \$20.00	7 Payee address; City: State: Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
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	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 05/04/2022	5 Payee name Paragon Paymnet Solutions	
6 Amount \$20.00	7 Payee address; City: State: Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
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	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 06/03/2022	5 Payee name Paragon Paymnet Solutions	
6 Amount \$63.88	7 Payee address; City: State: Zip Code 2141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895	
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	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F4:		2. FILER NAME Marilyn Burgess		3. Filer ID (Ethics Commission Filers)	
4. TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$812.94	
5 Date 03/21/2022		6 Payee name Black Heritage Society			
7 Amount \$200.00 <input type="checkbox"/> Expenditure from Corporate Funds		8 Payee address: City: State: Zip Code 363 N Sam Houston Pkwy E Ste 1100 Houston, TX 77060-2413			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Not Applicable for Form DCE			
10 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description	
		(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held			
5 Date 04/05/2022		6 Payee name Cardmember Services			
7 Amount \$145.83 <input type="checkbox"/> Expenditure from Corporate Funds		8 Payee address: City: State: Zip Code PO Box 6294 Carol Stream, IL 60197-6294			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Not Applicable for Form DCE			
10 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Fees		(b) Description	
		(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held			

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EXPENDITURES MADE BY CREDIT CARD**SCHEDULE F4****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F4:	2. FILER NAME Marilyn Burgess	3. Filer ID (Ethics Commission Filers)
4. TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$812.94
5 Date 06/05/2022	6 Payee name Cardmember Services	
7 Amount \$45.50 <input type="checkbox"/> Expenditure from Corporate Funds	8 Payee address: City: State: Zip Code PO Box 6294 Carol Stream, IL 60197-6294	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Not Applicable for Form DCE	
10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
5 Date 06/05/2022	6 Payee name Costco	
7 Amount \$176.17 <input type="checkbox"/> Expenditure from Corporate Funds	8 Payee address: City: State: Zip Code 21802 Townsen Blvd W Humble, TX 77338-1594	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Not Applicable for Form DCE	
10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F4:	2. FILER NAME Marilyn Burgess	3. Filer ID (Ethics Commission Filers)
4. TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$812.94
5 Date 04/27/2022	6 Payee name El Tiempo	
7 Amount \$112.91 <input type="checkbox"/> Expenditure from Corporate Funds	8 Payee address: City: State: Zip Code 2814 Navigation Blvd Houston, TX 77003-1236	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Not Applicable for Form DCE	
10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
5 Date 06/26/2022	6 Payee name Enterprise Rent a Car	
7 Amount \$203.11 <input type="checkbox"/> Expenditure from Corporate Funds	8 Payee address: City: State: Zip Code 17300 Palmetto Pines Houston, TX 77032-6516	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Not Applicable for Form DCE	
10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F4:		2. FILER NAME Marilyn Burgess		3. Filer ID (Ethics Commission Filers)	
4. TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$812.94	
5 Date 06/28/2022		6 Payee name Go Daddy			
7 Amount \$100.85 <input type="checkbox"/> Expenditure from Corporate Funds		8 Payee address: City: State: Zip Code 14455 N Hayden Rd Scottsdale, AZ 85260-6993			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Not Applicable for Form DCE			
10 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Fees		(b) Description	
		(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
5 Date 04/12/2022		6 Payee name League of Women Voters of Houston			
7 Amount \$130.97 <input type="checkbox"/> Expenditure from Corporate Funds		8 Payee address: City: State: Zip Code PO Box 270269 Houston, TX 77277-0269			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Not Applicable for Form DCE			
10 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description	
		(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F4:		2. FILER NAME Marilyn Burgess		3. Filer ID (Ethics Commission Filers)	
4. TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$812.94	
5 Date 06/18/2022		6 Payee name League of Women Voters of Houston			
7 Amount \$70.00 <input type="checkbox"/> Expenditure from Corporate Funds		8 Payee address: City: State: Zip Code PO Box 270269 Houston, TX 77277-0269			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Not Applicable for Form DCE			
10 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description	
		(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
5 Date 03/01/2022		6 Payee name Midtown Bar & Grill			
7 Amount \$230.52 <input type="checkbox"/> Expenditure from Corporate Funds		8 Payee address: City: State: Zip Code 415 W Gray St Houston, TX 77019-4442			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Not Applicable for Form DCE			
10 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Event Expense		(b) Description	
		(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F4:	2. FILER NAME Marilyn Burgess	3. Filer ID (Ethics Commission Filers)
4. TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$812.94
5 Date 03/01/2022	6 Payee name NGPVAN, Inc.	
7 Amount \$159.90 <input type="checkbox"/> Expenditure from Corporate Funds	8 Payee address: City: State: Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Not Applicable for Form DCE	
10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
5 Date 04/01/2022	6 Payee name NGPVAN, Inc.	
7 Amount \$266.50 <input type="checkbox"/> Expenditure from Corporate Funds	8 Payee address: City: State: Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Not Applicable for Form DCE	
10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F4:		2. FILER NAME Marilyn Burgess		3. Filer ID (Ethics Commission Filers)	
4. TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$812.94	
5 Date 04/04/2022		6 Payee name NGPVAN, Inc.			
7 Amount \$106.60 <input type="checkbox"/> Expenditure from Corporate Funds		8 Payee address: City: State: Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Not Applicable for Form DCE			
10 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule)		(b) Description	
		(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held			
5 Date 06/11/2022		6 Payee name NGPVAN, Inc.			
7 Amount \$266.50 <input type="checkbox"/> Expenditure from Corporate Funds		8 Payee address: City: State: Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Not Applicable for Form DCE			
10 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule)		(b) Description	
		(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held			

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F4:		2. FILER NAME Marilyn Burgess		3. Filer ID (Ethics Commission Filers)	
4. TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$812.94	
5 Date 04/30/2022		6 Payee name Omni Hotel			
7 Amount \$245.71 <input type="checkbox"/> Expenditure from Corporate Funds		8 Payee address: City: State: Zip Code 555 S Lamar St Dallas, TX 75202-1961			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Not Applicable for Form DCE			
10 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Travel Out Of District		(b) Description	
		(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
11 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held			
5 Date 05/13/2022		6 Payee name Pride Houston			
7 Amount \$1,001.70 <input type="checkbox"/> Expenditure from Corporate Funds		8 Payee address: City: State: Zip Code PO Box 540425 Houston, TX 77254-0425			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Not Applicable for Form DCE			
10 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Event Expense		(b) Description	
		(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
11 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held			

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F4:	2. FILER NAME Marilyn Burgess	3. Filer ID (Ethics Commission Filers)
4. TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$812.94
5 Date 05/13/2022	6 Payee name Roadwomen	
7 Amount \$150.00 <input type="checkbox"/> Expenditure from Corporate Funds	8 Payee address: City: State: Zip Code PO Box 22678 Houston, TX 77227-2678	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Not Applicable for Form DCE	
10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
5 Date 03/17/2022	6 Payee name Texas Gulf Coast ALF, AFL-CIO	
7 Amount \$250.00 <input type="checkbox"/> Expenditure from Corporate Funds	8 Payee address: City: State: Zip Code 2506 Sutherland St Houston, TX 77023-5305	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Not Applicable for Form DCE	
10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD**SCHEDULE F4****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F4:	2. FILER NAME Marilyn Burgess	3. Filer ID (Ethics Commission Filers)
4. TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$812.94
5 Date 03/15/2022	6 Payee name Urban Eats	
7 Amount \$198.79 <input type="checkbox"/> Expenditure from Corporate Funds	8 Payee address: City: State: Zip Code 3414 Washington Ave Houston, TX 77007-5935	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Not Applicable for Form DCE	
10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas; complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule G:	2. FILER NAME Marilyn Burgess	3. Filer ID (Ethics Commission Filers)
4 Date 06/05/2022	5 Payee name Amazon	
6 Amount \$5.36 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109-5210	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description
	(c) <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
4 Date 06/06/2022	5 Payee name Amazon	
6 Amount \$10.76 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109-5210	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description
	(c) <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 PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule G:	2. FILER NAME Marilyn Burgess	3. Filer ID (Ethics Commission Filers)
4 Date 06/09/2022	5 Payee name Misty Brown	
6 Amount \$60.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 17807 Springtree Dr Humble, TX 77396-1639	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description
	(c) <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
4 Date 03/01/2022	5 Payee name Cardmember Services	
6 Amount \$5,004.11 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 6294 Carol Stream, IL 60197-6294	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Credit Card Total	(b) Description
	(c) <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 PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule G:	2. FILER NAME Marilyn Burgess		3. Filer ID (Ethics Commission Filers)	
4 Date 05/25/2022	5 Payee name Charles Falk			
6 Amount \$150.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 2007 Little Cedar Dr Kingwood, TX 77339-1712			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees		(b) Description	
	(c) <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
4 Date 05/31/2022	5 Payee name Roadwomen			
6 Amount \$25.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 22678 Houston, TX 77227-2678			
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	
	(c) <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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