

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM **JC/OH**  
COVER SHEET PG 1

<b>The JC/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00084317	<b>2</b> Total pages filed:  28	
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Brittanye L.	MI	<b>OFFICE USE ONLY</b>  Date Received <b>ELECTRONICALLY FILED</b> 01/16/2021
	NICKNAME	LAST Morris	SUFFIX	
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 17503 Teal Forest Ln  Houston, TX 77379		ZIP CODE	Date Hand-delivered or Date Postmarked  Receipt #                      Amount  Date Processed  Date Imaged
	MS / MRS / MR Mr.		FIRST Adolf R.	MI
	NICKNAME	LAST Morris	SUFFIX	
	STREET ADDRESS (NO PO BOX PLEASE);                      APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE 17503 Teal Forest Lane  Spring, TX 77379			
<b>7</b> CAMPAIGN TREASURER PHONE	AREA CODE (713)	PHONE NUMBER 569-6966	EXTENSION	
<b>8</b> REPORT TYPE	<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)			
<b>9</b> PERIOD COVERED	Month    Day    Year                      THROUGH                      Month    Day    Year 07/22/2020                      12/31/2020			
<b>10</b> ELECTION	ELECTION DATE Month    Day    Year 11/03/2020		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
<b>11</b> OFFICE	OFFICE HELD (if any) None		<b>12</b> OFFICE SOUGHT (if known) District Judge District 333	

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# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

2 of 28

**13** C / OH NAME Morris, Brittanye L. (Ms.) **14** Filer ID (Ethics Commission Filers)  
00084317

**15** NOTICE FROM POLITICAL COMMITTEE(S)  
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.

Additional Pages

COMMITTEE TYPE <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

<b>16</b> CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	92,178.30
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	176.60
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$	40,745.50
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	51,255.90
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

**17** AFFADAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Ms. Brittanye L. Morris  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, 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

# SUBTOTALS - JC/OH

<b>18 FILER NAME</b> Morris, Brittanye L. (Ms.)		<b>19 Filer ID</b> 00084317	(Ethics Commission Filers)
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	89,232.27
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	2,946.03
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	40,745.50
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 1/14 Rpt: 4/28
<b>2</b> FILER NAME Morris, Brittanye L. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084317
<b>4</b> Date 08/22/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahmad J.D., Sufi (Mr.)	<b>7</b> Amount of Contribution (\$) \$4,854.70
<b>6</b> Contributor address; City; State; Zip Code  Spring, TX 77386		
<b>8</b> Contributor's Principal Occupation att		<b>9</b> Contributor's Job Title attorney at law
<b>10</b> Contributor's employer/law firm Ahmad		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amos J.D., Valex (Mr.)	Amount of Contribution (\$) \$485.20
Contributor address; City; State; Zip Code  HOUSTON, TX 77004		
Contributor's Principal Occupation attorney		Contributor's Job Title att
Contributor's employer/law firm The Amos Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anthony G. Buzbee, LP	Amount of Contribution (\$) \$30,000.00
Contributor address; City; State; Zip Code  HOUSTON, TX 77002		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 2/14 Rpt: 5/28
2 FILER NAME Morris, Brittanye L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00084317
4 Date 10/06/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold J.D., Kurt (Mr.)	7 Amount of Contribution (\$) \$4,854.70
	6 Contributor address; City; State; Zip Code  HOUSTON, TX 77007	
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title att
10 Contributor's employer/law firm Arnold-Itkin		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aziz J.D., Muhammad (Mr.)	Amount of Contribution (\$) \$2,427.20
	Contributor address; City; State; Zip Code  Hou, TX 77002	
Contributor's Principal Occupation att		Contributor's Job Title att
Contributor's employer/law firm Abraham Watkins		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck Redden	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  houston, TX 77010	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 3/14 Rpt: 6/28
<b>2</b> FILER NAME Morris, Brittanye L. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084317
<b>4</b> Date 10/22/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bivens J.D., Zenobia (Ms.)	<b>7</b> Amount of Contribution (\$) \$242.45
	<b>6</b> Contributor address; City; State; Zip Code  HOUSTON, TX 77027	
<b>8</b> Contributor's Principal Occupation attorney		<b>9</b> Contributor's Job Title att
<b>10</b> Contributor's employer/law firm Frost-Brown-Todd LLC		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Boutros J.D., Stephen (Mr.)	Amount of Contribution (\$) \$970.70
	Contributor address; City; State; Zip Code  Hou, TX 77056	
Contributor's Principal Occupation att		Contributor's Job Title att
Contributor's employer/law firm Stephen Boutros, LTD PI		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bryant J.D., Bradley (Mr.)	Amount of Contribution (\$) \$2,427.20
	Contributor address; City; State; Zip Code  Naples, FL 34103	
Contributor's Principal Occupation att		Contributor's Job Title att
Contributor's employer/law firm Bryant & Houston PA		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 4/14 Rpt: 7/28
2 FILER NAME Morris, Brittanye L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00084317
4 Date 09/09/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckley J.D., David (Mr.)	7 Amount of Contribution (\$)  \$970.70
	6 Contributor address; City; State; Zip Code  Houston, TX 77057	
8 Contributor's Principal Occupation att		9 Contributor's Job Title attorney at law
10 Contributor's employer/law firm The Buckley Law Firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carmona J.D., Christopher (Mr.)	Amount of Contribution (\$)  \$970.70
	Contributor address; City; State; Zip Code  Hou, TX 77248	
Contributor's Principal Occupation att		Contributor's Job Title att
Contributor's employer/law firm The Carmona Firm, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobrowski- Larkin and stafford	Amount of Contribution (\$)  \$1,000.00
	Contributor address; City; State; Zip Code  houston, TX 77007	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 5/14 Rpt: 8/28
2 FILER NAME Morris, Brittanye L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00084317
4 Date 12/23/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dobrowski- Larkin and stafford	7 Amount of Contribution (\$) \$5,000.00
	6 Contributor address; City; State; Zip Code  houston, TX 77007	
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gallagher Esq., Michael (Mr.)	Amount of Contribution (\$) \$2,427.20
	Contributor address; City; State; Zip Code  Houston, TX 77098	
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm The Gallagher Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garcia J.D., Rogelio (Mr.)	Amount of Contribution (\$) \$727.95
	Contributor address; City; State; Zip Code  Hou, TX 77023	
Contributor's Principal Occupation att		Contributor's Job Title att
Contributor's employer/law firm Rogelio Garcia		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 6/14 Rpt: 9/28
2 FILER NAME Morris, Brittanye L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00084317
4 Date 09/22/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza J.D., Dax (Mr.)	7 Amount of Contribution (\$) \$970.70
	6 Contributor address; City; State; Zip Code  Hou, TX 77002	
8 Contributor's Principal Occupation att		9 Contributor's Job Title att
10 Contributor's employer/law firm Dax Garcia		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson J.D., Jason (Mr.)	Amount of Contribution (\$) \$970.70
	Contributor address; City; State; Zip Code  Hou, TX 77098	
Contributor's Principal Occupation att		Contributor's Job Title att
Contributor's employer/law firm Gibson Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray Reed	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  houston, TX 77056	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 7/14 Rpt: 10/28
<b>2</b> FILER NAME Morris, Brittanye L. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084317
<b>4</b> Date 09/18/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guss J.D., Stewart (Mr.)	<b>7</b> Amount of Contribution (\$) \$2,427.20
	<b>6</b> Contributor address; City; State; Zip Code  Hou, TX 77070	
<b>8</b> Contributor's Principal Occupation att		<b>9</b> Contributor's Job Title att
<b>10</b> Contributor's employer/law firm Stewart Guss		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 09/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall J.D., Benjamin (Mr.)	Amount of Contribution (\$) \$970.70
	Contributor address; City; State; Zip Code  Houston, TX 77006	
Contributor's Principal Occupation att		Contributor's Job Title att
Contributor's employer/law firm The Hall Law Group, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hector, Katie (Ms.)	Amount of Contribution (\$) \$1,961.12
	Contributor address; City; State; Zip Code  Hou, TX 77006	
Contributor's Principal Occupation admin asst		Contributor's Job Title admin asst
Contributor's employer/law firm Ammons Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 8/14 Rpt: 11/28
<b>2</b> FILER NAME Morris, Brittanye L. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084317
<b>4</b> Date 09/22/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollins J.D., Christopher (Mr.)	<b>7</b> Amount of Contribution (\$) \$970.70
<b>6</b> Contributor address; City; State; Zip Code  Hou, TX 77002		
<b>8</b> Contributor's Principal Occupation Harris County Clerk		<b>9</b> Contributor's Job Title Harris County Clerk
<b>10</b> Contributor's employer/law firm Harris County		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 11/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hull, Carlton (Mr.)	Amount of Contribution (\$) \$48.25
Contributor address; City; State; Zip Code  Houston, TX 77091		
Contributor's Principal Occupation unk		Contributor's Job Title unk
Contributor's employer/law firm unk		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IBEW Pac Voluntary	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  Washington, DC 20001		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 9/14 Rpt: 12/28
2 FILER NAME Morris, Brittanye L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00084317
4 Date 10/06/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Itkin J.D., Jason (Mr.)	7 Amount of Contribution (\$) \$4,854.70
	6 Contributor address; City; State; Zip Code  Houston, TX 77007	
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title att
10 Contributor's employer/law firm Arnold-Itkin		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Juan J.D., Garcia (Mr.)	Amount of Contribution (\$) \$485.20
	Contributor address; City; State; Zip Code  Houston, TX 77074	
Contributor's Principal Occupation att		Contributor's Job Title attorney at law
Contributor's employer/law firm Johnson-Garcia		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kwok J.D., Robert (Mr.)	Amount of Contribution (\$) \$2,427.20
	Contributor address; City; State; Zip Code  Houston, TX 77024	
Contributor's Principal Occupation att		Contributor's Job Title att
Contributor's employer/law firm Kwok Daniel LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 10/14 Rpt: 13/28
2 FILER NAME Morris, Brittanye L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00084317
4 Date 09/14/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowenberg J.D., Mike (Mr.)	7 Amount of Contribution (\$)  \$1,456.20
	6 Contributor address; City; State; Zip Code  Hou, TX 77056	
8 Contributor's Principal Occupation att		9 Contributor's Job Title att
10 Contributor's employer/law firm Lowenberg & assco Firm LLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/17/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynch J.D., Walter (Mr.)	Amount of Contribution (\$)  \$388.10
	Contributor address; City; State; Zip Code  Hou, TX 77056	
Contributor's Principal Occupation att		Contributor's Job Title att
Contributor's employer/law firm Jordan, Lynch & Cancienne, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthiesen J.D., David (Mr.)	Amount of Contribution (\$)  \$2,427.20
	Contributor address; City; State; Zip Code  Hou, TX 77006	
Contributor's Principal Occupation att		Contributor's Job Title att
Contributor's employer/law firm David Matthiesen & Assoc		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 11/14 Rpt: 14/28
<b>2</b> FILER NAME Morris, Brittanye L. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084317
<b>4</b> Date 09/28/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery J.D., Joel (Mr.)	<b>7</b> Amount of Contribution (\$)  \$485.20
	<b>6</b> Contributor address; City; State; Zip Code  Hou, TX 77002	
<b>8</b> Contributor's Principal Occupation att		<b>9</b> Contributor's Job Title att
<b>10</b> Contributor's employer/law firm Shipley, Snell, Montgomery, LLP		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 09/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris Sr., Adolph (Mr.)	Amount of Contribution (\$)  \$48.25
	Contributor address; City; State; Zip Code  Spring, TX 77379	
Contributor's Principal Occupation Retired		Contributor's Job Title retired
Contributor's employer/law firm none		Law firm of contributor's spouse (if any) none
If contributor is a child, law firm of parent(s) (if any)		
Date 07/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramos J.D., Dion (Mr.)	Amount of Contribution (\$)  \$96.80
	Contributor address; City; State; Zip Code  Houston, TX 77007	
Contributor's Principal Occupation att		Contributor's Job Title attorney
Contributor's employer/law firm Dion Ramos attorney at law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 12/14 Rpt: 15/28
2 FILER NAME Morris, Brittanye L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00084317
4 Date 10/01/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds J.D., Chris (Mr.)	7 Amount of Contribution (\$) \$2,427.20
	6 Contributor address; City; State; Zip Code  Hou, TX 77002	
8 Contributor's Principal Occupation att		9 Contributor's Job Title att
10 Contributor's employer/law firm Reynolds & Frizzell, LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Royer J.D., Daniel (Mr.)	Amount of Contribution (\$) \$1,941.70
	Contributor address; City; State; Zip Code  Il, TX 62034	
Contributor's Principal Occupation attorney		Contributor's Job Title att
Contributor's employer/law firm Shradner & Assoc, LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susman- Godfrey	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77002	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 13/14 Rpt: 16/28
<b>2</b> FILER NAME Morris, Brittanye L. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084317
<b>4</b> Date 11/03/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tribble J.D., Wesson (Mr.)	<b>7</b> Amount of Contribution (\$) \$242.45
<b>6</b> Contributor address; City; State; Zip Code  HOUSTON, TX 77057		
<b>8</b> Contributor's Principal Occupation attorney		<b>9</b> Contributor's Job Title att
<b>10</b> Contributor's employer/law firm Tribble-Ross, LLP		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Daniel (Mr.)	Amount of Contribution (\$) \$96.80
Contributor address; City; State; Zip Code  HOUSTON, TX 77002		
Contributor's Principal Occupation unk		Contributor's Job Title unk
Contributor's employer/law firm Susman Godfrey LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yetter Coleman LLP	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  houston, TX 77002		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 14/14 Rpt: 17/28
<b>2</b> FILER NAME Morris, Brittanye L. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00084317
<b>4</b> Date 09/28/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zehl J.D., Ryan (Mr.)	<b>7</b> Amount of Contribution (\$) \$2,427.20
	<b>6</b> Contributor address; City; State; Zip Code  Hou, TX 77056	
<b>8</b> Contributor's Principal Occupation att		<b>9</b> Contributor's Job Title att
<b>10</b> Contributor's employer/law firm Ryan Zehl & Assoc. PI		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 1/1 Rpt: 18/28	
2 FILER NAME Morris, Brittaneye L. (Ms.)		3 Filer ID (Ethics Commission Filers) 00084317	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 10/30/2020	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amicus PAC	8 Amount of contribution (\$) \$2,946.03	9 In-kind contribution description Direct mail
	7 Contributor address; City; State; Zip Code  HOUSTON, TX 77265	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
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 parent(s) (if any) (FOR JUDICIAL)			

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/10 Rpt: 19/28	<b>2</b> FILER NAME Morris, Brittanye L. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084317
<b>4</b> Date 09/02/2020	<b>5</b> Payee name ACT BLUE-Hou Black democrats	
<b>6</b> Amount (\$) \$500.00	<b>7</b> Payee address; City; State; Zip Code 4619 Lyons Ave  HOUSTON, TX 77020	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/21/2020	Payee name ACT Blue	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 2704 SAM WILSON ST #A  HOUSTON, TX 77020	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/09/2020	Payee name Amegy Bank	
Amount (\$) \$6.00	Payee address; City; State; Zip Code 17046 Stubner Airline  spring, TX 77379	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense cks
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/10 Rpt: 20/28	<b>2</b> FILER NAME Morris, Brittanye L. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084317
<b>4</b> Date 11/12/2020	<b>5</b> Payee name Bayou City Seafood and Pasta	
<b>6</b> Amount (\$) \$86.57	<b>7</b> Payee address; City; State; Zip Code 4712 Richmond Ave  houston, TX 77027	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff interview lunch
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/16/2020	Payee name Brittanye, Morris	
Amount (\$) \$4,000.00	Payee address; City; State; Zip Code 17503 Teal Forest lane  spring, TX 77379	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement of legal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/21/2020	Payee name Choir Robes Creations	
Amount (\$) \$364.00	Payee address; City; State; Zip Code 3804 poplar st  houston, TX 77087	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Robe	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Robe fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/10 Rpt: 21/28	<b>2</b> FILER NAME Morris, Brittanye L. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084317
<b>4</b> Date 09/21/2020	<b>5</b> Payee name Eprint2day,LLC	
<b>6</b> Amount (\$) \$1,163.69	<b>7</b> Payee address; City; State; Zip Code 17018 Ella Blvd  Houston, TX 77090	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign lit
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/21/2020	Payee name Eprint2day,LLC	
Amount (\$) \$92.01	Payee address; City; State; Zip Code 17018 Ella Blvd  Houston, TX 77090	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign lit
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/01/2020	Payee name Eprint2day,LLC	
Amount (\$) \$884.94	Payee address; City; State; Zip Code 17018 Ella Blvd  Houston, TX 77090	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/10 Rpt: 22/28	<b>2</b> FILER NAME Morris, Brittanye L. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084317
<b>4</b> Date 10/16/2020	<b>5</b> Payee name Eprint2day,LLC	
<b>6</b> Amount (\$) \$3,587.55	<b>7</b> Payee address; City; State; Zip Code 17018 Ella Blvd  Houston, TX 77090	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs, shirts, Mask,
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/03/2020	Payee name Go Daddy	
Amount (\$) \$174.06	Payee address; City; State; Zip Code 14455 N. Hayden Rd  Scottsdale , AZ 85260	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website, Domain, Email, and security service fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2020	Payee name Harris County Democatic party	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 4619 Lyons Ave  HOUSTON, TX 77020	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 5/10 Rpt: 23/28	<b>2</b>	FILER NAME Morris, Brittanye L. (Ms.)	<b>3</b>	Filer ID (Ethics Commission Filers) 00084317
<b>4</b>	Date 10/13/2020	<b>5</b>	Payee name Harris County Democratic Party		
<b>6</b>	Amount (\$) \$2,643.00	<b>7</b>	Payee address; City; State; Zip Code 4619 Lyons Ave  HOUSTON, TX 77020		
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation		
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/13/2020		Payee name Houston Sign Co		
	Amount (\$) \$52.66		Payee address; City; State; Zip Code 5801 Chimney Rock  Houston, TX 77081		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire stakes for signs		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/09/2020		Payee name Made prime		
	Amount (\$) \$1,750.00		Payee address; City; State; Zip Code 401 Lousiana St  houston, TX 77002		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Head shots and Deposit for Investiture Photos		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/10 Rpt: 24/28	<b>2</b> FILER NAME Morris, Brittanye L. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084317
<b>4</b> Date 10/01/2020	<b>5</b> Payee name Raise Karma	
<b>6</b> Amount (\$) \$13,960.00	<b>7</b> Payee address; City; State; Zip Code 10806 Candlewood Dr  Houston, TX 77042	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Branding, endorsement, PR, social media, & website
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2020	Payee name Raising Karma	
Amount (\$) \$4,000.00	Payee address; City; State; Zip Code 10806 Candlewood Dr  HOUSTON, TX 77042	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Poll Workers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2020	Payee name Ruggles Black	
Amount (\$) \$135.00	Payee address; City; State; Zip Code 3963 Kirby Dr  houston, TX 77098	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense staff Lunch
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/10 Rpt: 25/28	<b>2</b> FILER NAME Morris, Brittanye L. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084317
<b>4</b> Date 12/09/2020	<b>5</b> Payee name Shopify	
<b>6</b> Amount (\$) \$119.96	<b>7</b> Payee address; City; State; Zip Code 150 elgin street  ottawa ontario Canada	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense embedded e-commerce feature on website Quarterly fee.
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/25/2020	Payee name Texas Center for the Judiciary	
Amount (\$) \$65.00	Payee address; City; State; Zip Code 201 Caroline St  houston, TX 77002	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2020 College for New Judges
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/05/2020	Payee name Texas Democratic Party	
Amount (\$) \$775.00	Payee address; City; State; Zip Code 4619 Lyons Ave  Houston, TX 77020	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Party donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/10 Rpt: 26/28	<b>2</b> FILER NAME Morris, Brittanye L. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084317
<b>4</b> Date 09/10/2020	<b>5</b> Payee name Tourão Brazilian Churrasqueria	
<b>6</b> Amount (\$) \$140.00	<b>7</b> Payee address; City; State; Zip Code 4412 Montrose Blvd  houston, TX 77006	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign Lunch
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/19/2020	Payee name United states postal service	
Amount (\$) \$43.00	Payee address; City; State; Zip Code 2909 Rogerdale rd  Houston, TX 77042	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Re-key PO Box fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/10/2020	Payee name United states postal service	
Amount (\$) \$120.00	Payee address; City; State; Zip Code 2909 Rogerdale rd  Houston, TX 77042	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Post Office Box Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/10 Rpt: 27/28	<b>2</b> FILER NAME Morris, Brittanye L. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084317
<b>4</b> Date 09/21/2020	<b>5</b> Payee name act blue donate to dems	
<b>6</b> Amount (\$) \$200.00	<b>7</b> Payee address; City; State; Zip Code 2704 SAM WILSON ST #A  HOUSTON, TX 77020	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/21/2020	Payee name act blue women in nov	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 4619 Lyons  HOUSTON, TX 77020	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2020	Payee name amazon	
Amount (\$) \$32.46	Payee address; City; State; Zip Code 10550 Ella blvd  houston, TX 77038	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense carry baskets
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/10 Rpt: 28/28	<b>2</b> FILER NAME Morris, Brittanye L. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00084317
<b>4</b> Date 10/15/2020	<b>5</b> Payee name amazon	
<b>6</b> Amount (\$) \$153.58	<b>7</b> Payee address; City; State; Zip Code 10550 Ella blvd  houston, TX 77038	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense hand sanitizer
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/13/2020	Payee name amazon	
Amount (\$) \$110.42	Payee address; City; State; Zip Code 10550 Ella blvd  houston, TX 77038	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Supplies	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense storage boxes and storage supplies for campaign materials
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2020	Payee name sears, camile	
Amount (\$) \$110.00	Payee address; City; State; Zip Code 6250 WestPark Drive  houston, TX 77057	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense make-up for headshot
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held