FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00084199 18 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Ms. Dawn Deshea NAME Date Received **ELECTRONICALLY FILED** 01/14/2021 NICKNAME LAST **SUFFIX** Rogers CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 6037 N. Fry Rd., Ste. 126-39 MAILING Receipt # Amount **ADDRESS** Change of Address Katy, TX 77449 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Stacia NAME NICKNAME LAST **SUFFIX** Wilson **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER** 19518 Brittany Creek Dr. **ADDRESS** (Residence or Business) Spring, TX 77388 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (281) 924-0250 **PHONE** REPORT TYPE 30th day before election Runoff 15th day after campaign treasurer January 15 lx l appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 10/25/2020 12/31/2020 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/03/2020 χ General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge Place 334th District Civil Harris

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 18

13 C / OH NAME	Rogers, Dawn Deshe	ea (Ms.)	14 Filer ID 00084199	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without d officeholders are required to report this informatio	the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTIBUTION	1. TOTAL UNITEM	IZED POLITICAL CONTRIBUTIONS(OTHER THAI	NDIEDGES LOANS	
TOTALS	OR GUARANTE	ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 6,640.00
EXPENDITURE TOTALS	· ·	IZED POLITICAL EXPENDITURES	<u> </u>	\$ 0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 3,526.24
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 43,464.50
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFADAVIT				
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
		Ms. Da	awn Deshea Rogers	
		Signature of	Candidate or Officeho	lder
AFFIX NOT	ΓARY STAMP / SEAL AΒ	OVE		
Sworn to and subso	ribed before me, by the s	aid	, this the	day
of	, 20, to co	ertify which, witness my hand and seal of office.		
Signature of office	er administering oath	Printed name of officer administering oath	Title of office	r administering oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

				JVER SHE	3 of 18
18 FIL		ME awn Deshea (Ms.)	19 Filer ID 00084199	(Ethics Commi	ssion Filers)
20 SC NA	HEDUL ME OF		SUBTOTA	AL AMOUNT	
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	6,640.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	3,526.24
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER	RETURNED	\$	

MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
The Instru	ction Guide explains ho	ow to complete this t	form.	1 Total pages Schedule A(J)1: Sch: 1/4 Rpt: 4/18
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Rogers, Dav	vn Deshea (Ms.)			00084199
4 Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/29/2020	Baker Botts Amicus Fur	nd		\$2,500.00
	6 Contributor address; City;	State; Zip Code		
	Houston, TX 77002			
8 Contributor's I	Principal Occupation		9 Contributor's Job Title	
10 Contributor's 6	employer/law firm		11 Law firm of contributor's s	pouse (if any)
12 If contributor is	s a child, law firm of parent(s) (i	if any)		
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/30/2020	Dacey, Derin	–		\$10.00
	Contributor address; City;	State; Zip Code		·· <mark>·</mark>
	Houston, TX 77007			
Contributor's F	Principal Occupation		Contributor's Job Title	L
Academic A	dvisor		Academic Advisor	
Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
University of	Houston			
If contributor is	s a child, law firm of parent(s) (i	if any)		
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/30/2020	Humphrey, Pamela			\$200.00
	Contributor address; City;	State; Zip Code		
	Houston, TX 77056			
Contributor's I	Principal Occupation		Contributor's Job Title	
Client executive		Senior VP		
Contributor's employer/law firm CHUBB INSURANCE			Law firm of contributor's s	pouse (if any)
	s a child, law firm of parent(s) (i	if any)		
ii contributor i	s a criliu, iaw ilitri of pareril(s) (i	n any)		
1				

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	he Instruction Guide explains how to complete this form.			1	Total pages Schedule A(J)1: Sch: 2/4 Rpt: 5/18
2	FILER NAME Rogers, Dav	vn Deshea (Ms.)			3	Filer ID (Ethics Commission Filers) 00084199
4	Date 12/02/2020	Date 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$) \$500.00	
		Houston, TX 77024				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			PRINCIPAL OWNER		
10		employer/law firm if Jeffrey Newport		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	12/23/2020	Kastl, Kristina Contributor address; City;	<u> </u>			\$125.00
		TX				
	Contributor's I	Principal Occupation		Contributor's Job Title		
Contributor's employer/law firm Law firm of contributor's sp				oous	se (if any)	
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	10/30/2020	Shrader, Justin	_			\$2,000.00
		Contributor address; City; S Houston, TX 77046	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Attorney Partner			Partner		
	Contributor's employer/law firm Law firm of contributor's s			oous	se (if any)	
Shraders & Associates, LPP						
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A(J)1		
	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total page Sch: 3/4	es Schedule A(J). Rpt: 6/18	1:
2	FILER NAME Rogers, Daw	wn Deshea (Ms.)			3	Filer ID ((Ethics Commiss 9	ion Filers)
4	Date 10/26/2020	5 Full name of contributor Steptoe, Cedric6 Contributor address; City; St	out-of-state PAC (ID#:_)	7	Amount of	f Contribution (\$)	\$50.00
_		Houston, TX 77049		T , _ ,	L			
		Principal Occupation		9 Contributor's Job Title				
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	ous	se (if any)		
12	If contributor is	s a child, law firm of parent(s) (if a	any)					
	Date	Full name of contributor	out-of-state PAC (ID#:_)	$\overline{\top}$	Amount of	f Contribution (\$)	
	11/02/2020	Wade, Tiffany Contributor address; City; St	tate; Zip Code					\$250.00
_	2 tulburahanla l	Houston, TX 77234		To a the same tab Tide	\perp			
	·		Contributor's Job Title PRINCIPAL OWNER					
_		employer/law firm		Law firm of contributor's sp	าดนะ	e (if anv)		
	The Wade O		ı		,	, ,,		
	If contributor is	s a child, law firm of parent(s) (if a	any)	<u></u>				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	$\overline{\top}$	Amount of	f Contribution (\$)	
	11/03/2020	WorldWinners						\$5.00
		Contributor address; City; St Katy, TX 77449	tate; Zip Code					
	Contributor's F	Principal Occupation		Contributor's Job Title				
Contributor's employer/law firm			Law firm of contributor's sp	ous	se (if any)			
	If contributor is	s a child, law firm of parent(s) (if a	any)					

MONE	TARY POLITICAL CONTRIBUTION	ONS	S	CHEDULE A(J)1
The Instr	The Instruction Guide explains how to complete this form. 1 Total page Sch: 4/4			
2 FILER NAMI	E		3 Filer ID (E	thics Commission Filers)
Rogers, Da	wn Deshea (Ms.)		00084199	
4 Date	5 Full name of contributor out-of-state PAC (ID#	:)	7 Amount of C	
12/29/2020				\$1,000.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77002	Ta a		
8 Contributor's	s Principal Occupation	9 Contributor's Job Title		
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	oouse (if any)	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 1/11 Rpt: 8/18	Rogers, Dawn Deshea (Ms.) 00084199
4	Date	5 Payee name
	10/31/2020	ABM America Tower
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3.00	1111 Fannin St Suite 1500
		Houston, TX 77002
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Parking to attend campaign event
		Samuel Company
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	
	Date	Payee name
	12/05/2020	AMAZON
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.86	410 Terry Ave.
		SEATTLE, WA 98109-5210
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Donation of Christmas toys to "Children Like Loni"
		charitable organization
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	1
	Date	Payee name
	12/07/2020	AMAZON
	Amount (\$)	Payee address; City; State; Zip Code
	\$69.24	410 Terry Ave
		North Seattle, WA 98109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		charitable organization
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y
1		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 2/11 Rpt: 9/18	Rogers, Dawn Deshea (Ms.)	00084199
4	Date	5 Payee name	•
	11/04/2020	BAILEY, CYNTHIA	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$500.00	7830 Flintridge	
		Houston, TX 77028	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	/tavertisting Expense	el outside of Texas. Complete Schedule T.
		I	tin, TX, officeholder living expense noving campaign signs
		Cost for for	noving campaign signs
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	12/22/2020	Choir Robes Creations	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$222.00	3804 Poplar St.	
		·	
		Houston, TX 77087	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Cost for judicial robe	el outside of Texas. Complete Schedule T.
	EXPENDITORE	l	tin, TX, officeholder living expense
		Cost for jud	iciai robe
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·	Office field
_	Date	Davies manua	
	11/12/2020	Payee name DIXON, LENORA	
	Amount (\$) \$100.00	Payee address; City; State; Zip Code	
	Ψ100.00		
		Houston, TX	
	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) Polling Expense (b) Description Check if trave	el outside of Texas. Complete Schedule T.
	EXPENDITURE	I dilling Expense	tin, TX, officeholder living expense
		Cost for pol	l worker
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experialitie to belieff C/Of		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	l Committee 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 F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/11 Rpt: 10/18	Rogers, Dawn Deshea (Ms.) 00084199
4	Date	5 Payee name
	11/03/2020	Fiesta Mart
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$19.09	20331 FM 529
		CYPRESS, TX 77443
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Cost for beverages/ice at polling location
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
Г	Date	Payee name
	10/29/2020	HARRIS COUNTY DEMOCRATIC PARTY
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	4619 LYONS AVE.
		HOUSTON, TX 77020
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	10/27/2020	Humphries, Jon
	Amount (\$)	Payee address; City; State; Zip Code
	\$435.00	
		Houston, TX
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Reimbursement for money paid to The Turkey Leg
		Hut for "Voting After Dark" GOTV event.
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
Г		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
_	Sch: 4/11 Rpt: 11/18	Rogers, Dawn Deshea (Ms.) Rogers, Dawn Deshea (Ms.)
4	Date	5 Payee name
	10/27/2020	Lawton, Audrie
6	Amount (\$) \$65.00	7 Payee address; City; State; Zip Code PO Box 202116
		Houston, TX 77220
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Reimbursement for money paid to graphic designer for "Voting After Dark" GOTV flyer.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Ħ	Date	Payee name
	12/31/2020	Lucille's
	Amount (\$)	Payee address; City; State; Zip Code
	\$155.50	5512 LaBranch St.
		Houston, TX 77002
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Catering expense for Swearing In ceremony
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/15/2020	M3 GRAPHICS
	Amount (\$)	Payee address; City; State; Zip Code
	\$121.78	11730 Wilcrest Dr
		HOUSTON, TX 77099
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Cost for Holiday Cards
		- Courte Heliaus
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	d Committee 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 F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/11 Rpt: 12/18	Rogers, Dawn Deshea (Ms.) 00084199
4	Date	5 Payee name
	10/30/2020	Michel, Bryant
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$180.00	3307 Deeds Road
		Houston, TX 77084
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Payment for poll work
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H
⊨	Data	
	Date 11/03/2020	Payee name Michael Bright
L		Michel, Bryant
	Amount (\$)	Payee address; City; State; Zip Code
	\$180.00	3307 Deeds Road
		Houston, TX 77084
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Cost for poll work
		Social painties.
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H
⊨	Data	Davies same
	Date 11/03/2020	Payee name Norman, Paulette
		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	
		Houston, TX
_	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Polling Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Payment to Poll worker
L		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
<u> </u>	experientare to beliefft G/O	
L		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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 F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/11 Rpt: 13/18	Rogers, Dawn Deshea (Ms.) 00084199
4	Date	5 Payee name
	10/31/2020	On Street Parking
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$0.50	
		Houston, TX 77002
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Parking to attend press conference at The Breakfast
		Club
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Date	Payee name
	12/10/2020	On Street Parking
	Amount (\$)	Payee address; City; State; Zip Code
	\$8.50	rayee address, City, State, Zip Code
	φο.30	
		H
		Houston, TX 77002
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Parking fees for Courthouse visit Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Street parking to visit courthouse for IT training.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	12/18/2020	On Street Parking
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.00	
		Houston, TX 77002
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Cost for downtown Houston parking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Cost for parking to go to 301 Fannin and complete HR forms
	Commission ONU Wife allows	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	· · · · · · · · · · · · · · · · · · ·	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee Legal S	ards/Memorials Expenservices struction Guide e	Salaries	/Wage	s/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed a	bove)
-	Total pages Cabadula 54:	12				.,.		1-	Filor ID	(Ethios Commit-	sion Filers\
1	Total pages Schedule F1: Sch: 7/11 Rpt: 14/18		Rogers, Dawn D	eshea (Ms.)				3	Filer ID 00084199	(Ethics Commiss	Sion Fliers)
4	Date	5	Payee name								
	10/26/2020		PAYPAL								
6	Amount (\$)	7	Payee address;	City;	State; Zip C	ode					
	\$1.75		2211 North First	Street							
			SAN JOSE, CA	95131							
8	PURPOSE	(a)	Category (See Cate		of this schedule)	(b)	Description				
	OF EXPENDITURE		Accounting/Bank	ing					de of Texas. Com		
							Paypal transa		officeholder living	expense	
							r aypar transc		011 1000		
9	Complete ONLY if direct		Candidate/Officehol	der name	Office so	<u>l</u> ught			Office he	eld	
	expenditure to benefit C/O					9					
	Date		Payee name								
	10/30/2020		PAYPAL								
	Amount (\$)		Payee address;	City;	State; Zip C	ode					
	\$6.10		2211 North First	Street							
			SAN JOSE, CA	95131							
	PURPOSE OF	(a)	Category (See Cate		of this schedule)	(b)	Description				
	EXPENDITURE		Accounting/Bank	ing			ш		de of Texas. Comp officeholder living		
							Paypal transa				
							,,				
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officehol	ler name	Office so	ught			Office he	eld	
_		_									
	Date		Payee name								
	10/30/2020		PAYPAL								
	Amount (\$)		Payee address;	City;	State; Zip C	ode					
	\$0.59		2211 North First	Street							
			OAN 1005 5:	54.04							
			SAN JOSE, CA			1					
	PURPOSE OF	(a) 	Category (See Cate		of this schedule)	(b)	Description Check if travel	Olite:	de of Texas. Com	nlata Schadulo T	
	EXPENDITURE		Accounting/Bank	ing					officeholder living		
							Paypal transa			•	
	Complete ONLY if direct		Candidate/Officehol	ler name	Office so	ught			Office he	eld	
	expenditure to benefit C/O	Н									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
╙		The Instruction Guide explains how to complete this form.	_
1	Total pages Schedule F1: Sch: 8/11 Rpt: 15/18	2 FILER NAME Rogers, Dawn Deshea (Ms.)	3 Filer ID (Ethics Commission Filers) 00084199
L	3cii. 0/11 Kpt. 13/10		00004199
4	Date	5 Payee name	
	10/30/2020	PAYPAL	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$58.30	2211 North First Street	
	400.00		
		San Jose, CA 95131	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		l outside of Texas. Complete Schedule T.
	LAFENDITORE		n, TX, officeholder living expense
		Paypal trans	saction fees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
F	Date	Payee name	
	11/02/2020	PAYPAL	
L			
	Amount (\$)	Payee address; City; State; Zip Code	
	\$7.55	2211 North First Street	
		San Jose, CA 95131	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		l outside of Texas. Complete Schedule T.
	EXPENDITURE	/ tecounting/ Banking	in, TX, officeholder living expense
		Paypal trans	saction fees
H	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Cindo Nola
⊨			
	Date	Payee name	
	11/03/2020	PAYPAL	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$0.45	2211 North First Street	
		San Jose, CA 95131	
1	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	Louiside of Tours Commission C. L. L. T.
	EXPENDITURE	/ tecounting/ banking	l outside of Texas. Complete Schedule T.
		Paypal trans	in, TX, officeholder living expense
1		Paypai trans	0401011 1003
$ldsymbol{f eta}$			
1	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L		1	
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ng Expense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaring Magas/Contract Labor

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - રા Cor	nmittee	Gift/Awards/Memoria Legal Services The Instruction (·		/ages/	/Contract Labor		Travel Out of E OTHER (enter	District a category not liste	ed above)
1	Total pages Schedule F1:	2	FII FR NAME						3	Filer ID	(Ethics Comr	nission Filers)
	Sch: 9/11 Rpt: 16/18	Ĺ		wn Deshea (M	s.)					00084199	,	,
4	Date	5	Payee name									
	12/02/2020		PAYPAL									
6	Amount (\$) \$14.80	7	Payee addres		State	e; Zip Co	de					
			San Jose, C	A 95131								
8	PURPOSE	(a)	Category (Se	ee Categories listed a	t the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Accounting/					_			mplete Schedule T.	
	_/DITORE							_		, officeholder livii	ng expense	
								Paypal transa	acti	on tees		
_	0 1: -:											
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	ceholder name		Office sou	ght			Office I	neid	
	Date		Payee name									
	12/23/2020		PAYPAL									
	Amount (\$)	厂	Payee addres	ss; City;	State	; Zip Co	de					
	\$3.93		2211 North	First Street								
			San Jose, C									
	PURPOSE OF	(a)		ee Categories listed a	t the top of this sch	nedule)	(b)	Description	o	do of T-	mulete C-1	
	EXPENDITURE		Accounting/	'Banking				=		ide of Texas. Co , officeholder livii	mplete Schedule T ng expense	
								Paypal transa			J	
)				
	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	ceholder name	(Office sou	ght			Office h	neld	
	Date	Π	Payee name				_					
	12/29/2020		PAYPAL									
	Amount (\$)	\vdash	Payee addres	ss; City;	State	; Zip Co	de					
	\$29.30		2211 North	-	Siaic	, 00						
	Ψ29.50		1401111	5. 5. 6. 661								
			San Jose, C	A 95131								
	PURPOSE OF			ee Categories listed a	t the top of this sch	nedule)	(b)	Description			_	
	OF EXPENDITURE		Accounting/	'Banking							mplete Schedule T.	
								Check if Austin, Paypal transa		, officeholder livii on fees	ng expense	
								, aypui ii al 15c	المحدا	JII 1663		
	Complete ONLY if direct	<u>_</u>	`andidate/O#:	ceholder name		Office sou	nh+			Office h	neld	
	expenditure to benefit C/OF		Ja∷uludle/U∏I	cendidel Hame	(onice SOU(gril			Office I	iciu	
_	· · · · · =											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:		Filer ID (Ethics Commission Filers)
	Sch: 10/11 Rpt: 17/18	Rogers, Dawn Deshea (Ms.)	00084199
4	Date	5 Payee name	
	12/29/2020	POSTAL PLUS ONE	
6	Amount (\$) \$37.00	7 Payee address; City; State; Zip Code 6037 N. Fry Rd. Katy, TX 77449	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	tside of Texas. Complete Schedule T. X, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/11/2020	Texas Center for the Judiciary	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$65.00	1210 San Antonio, Suite 800	
	DUPPO -	Austin, TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel out	tside of Texas. Complete Schedule T.
	EXPENDITURE	addige seriour educational expense	X, officeholder living expense
		Cost for registe	ering for New Judge College
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	12/02/2020	The Houston GLBT Political Caucus	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$40.00	Post Office Box 66664	
		Houston, TX 77266	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	toide of Toyon, Complete Schoolule T
	EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense
			ership fee to Houston GLBT political
		caucus	·
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	· · · · ·		

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)

1		The Instruction Guide explains how to complete this	s form.
	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 11/11 Rpt: 18/18	Rogers, Dawn Deshea (Ms.)	00084199
4	Date	5 Payee name	-
	10/31/2020	WOODFOREST BANK	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$12.00	P.O. Box 7889	
		The Woodlands, TX 77387	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Desc	ription
	OF	· · · · · · · · · · · · · · · · · · ·	neck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		neck if Austin, TX, officeholder living expense
		Ban	king account fees
L			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	·	-	
	Date	Payee name	
	10/31/2020	Watson, Evelyn	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$60.00		
		Houston, TX	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Desc	ription
	OF EXPENDITURE	I I dilling Expense	neck if travel outside of Texas. Complete Schedule T.
			neck if Austin, TX, officeholder living expense ment for poll worker
		1 3,1	noncior poli worker
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
1			