### JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to com	plete this form.	1 Filer ID (Ethics Commiss 00084338	ion Filers)	2 Total pages fi	led: L9
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	r	
OFFICEHOLDER	Ms.	Cheryl N.			OFFICE	USE ONLY
NAME	1415.	Cheryr N.			Date Received	
					ELECTRONIC	ALLY FILED
	NICKNAME	LAST		SUFFIX	01/15/2021	
	NICKIANE	Elliott Thornto	2	30111X		
		Ellioli Thomio	n			
4 CANDIDATE /	ADDRESS / PO BOX; AP	T / SUITE #; CIT	Y;	ZIP CODE	Date Hand-delivered of	or Date Postmarked
OFFICEHOLDER	P.O. Box 123					
MAILING	1.0. Box 120				Receipt #	Amount
ADDRESS						
Change of Address	Houston, TX 77001				Data Drassand	
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER	Dr.	Betty				
NAME	DI.	Бещу				
	NICKNAME	LAST			SUFFIX	
		Lewis				
		Louio				
6 CAMPAIGN	STREET ADDRESS (NO PO	D BOX PLEASE);	APT	/ SUITE #; CITY;	ST	ATE; ZIP CODE
TREASURER ADDRESS	4743 Knotty Oaks Trl					
ADDRESS	-					
(Residence or Business)						
	Houston, TX 77045					
7 CAMPAIGN	AREA CODE PHO	NE NUMBER	EXTENSION			
TREASURER	(713) 819-5031					
PHONE	, ,					
8 REPORT						
TYPE	X January 15	30th day before		Runoff	15th day after ca	mpaign treasurer
					appointment (offi	
	July 15	8th day before	election E	Exceeded modified	Final Report (Att	ach C/OH-FR)
				eporting limit		,
9 PERIOD COVERED	Month Day Year			Month Day	Year	
COVERED	10/25/2020	TH	IROUGH	12/31/202	0	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	X P	rimary		Other	
	03/05/2024		lillary	Kulloli	Other	
	03/03/2024		eneral	Special		
			i		(f) >	
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
	District Judge District 164	1 Harris		District Judge Di	strict 164	
		GO 1	O PAGE 2			
Forms provided by Te	exas Ethics Commission	www.et	hics.state.tx.us		Ve	ersion V1.1.ceffd98

### JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 19

T

13 C / OH NAME	Elliott Thornton, Chei	yl N. (Ms.)	14 Filer ID 00084338	(Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or polition These expenditures may have been m officeholders are required to report the	ade without the candidate's or offic	ceholder's knowledge or		
Additional Pages		COMMITTEE NAME				
	GENERAL	COMMITTEE ADDRESS				
		COMMITTEE CAMPAIGN TREASUR	ER NAME			
		COMMITTEE CAMPAIGN TREASUR	ER ADDRESS			
		ZED POLITICAL CONTRIBUTIONS(C				
<b>16</b> CONTIBUTION TOTALS	<b>\$</b> 0.00					
		CAL CONTRIBUTIONS	S OF LOANS)	\$ 26,250.00		
EXPENDITURE TOTALS						
	4. TOTAL POLITICAL EXPENDITURES					
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED A RIOD	S OF THE LAST DAY OF THE	\$ 32,915.92		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING TING PERIOD	LOANS AS OF THE LAST DAY	\$ 0.00		
17 AFFADAVIT						
			under penalty of perjury, that the and includes all information required ction Code.			
			Ms. Cheryl N. Elliott Thornto	on		
			Signature of Candidate or Officeho	older		
AFFIX NOTARY STAMP / SEAL ABOVE						
		aid		day		
of	, 20, to c	rtify which, witness my hand and seal	of office.			
Signature of offic	cer administering oath	Printed name of officer administe	ring oath Title of office	er administering oath		
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V1.1.ceffd98a		

### FORM JC/OH COVER SHEET PG 3

3 of 19

	18 FILER NAME 19 Filer ID (					
Elliott Tho 20 SCHEDULE	rnton, Cheryl N. (Ms.)	00084338	<del></del>			
	SCHEDULE		SUBTC	TAL AMOUNT		
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	26,250.00		
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$			
3.	3. SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)					
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$			
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	27,430.67		
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$			
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$			
8.	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD					
9.	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	ONS	\$			
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$			

SUBTOTALS - JC/OH

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 1/6 Rpt: 4/19			
2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
	ton, Cheryl N. (Ms.)		00084338		
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)		
10/30/2020	Baker Botts Amicus Fund		\$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 e	employer/law firm	11 Law firm of contributor's sp	oouse (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#:	<b>`</b>	Amount of Contribution (\$)		
12/15/2020	Full name of contributor out-of-state PAC (ID#:_ Bracewell PAC	)			
12/15/2020			\$2,500.00		
	Contributor address; City; State; Zip Code				
	Houston, TX 77002				
Contributor's I	Principal Occupation	Contributor's Job Title	•		
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (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 (\$)		
12/31/2020	Burford Perry LLP	)	\$500.00		
12/01/2020					
	Contributor address; City; State; Zip Code				
	Houston, TX 77010				
Contributor's I	Principal Occupation	Contributor's Job Title			
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)		
If contributor is	s a child, law firm of parent(s) (if any)	•			
	by Taxas Ethics Commission	e etato tv ue	Version V/1 1 ceffd98a		

The Instrue	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 2/6 Rpt: 5/19	
2 FILER NAME Elliott Thornt	on, Cheryl N. (Ms.)		3 Filer ID (Ethics Commission Filers) 00084338
4 Date 12/27/2020	<ul> <li>5 Full name of contributor out-of-state PAC (ID#: Out-of-state PAC (ID#:))</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$500.00
	Houston, TX 77401		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
<b>10</b> Contributor's e	employer/law firm	<b>11</b> Law firm of contributor's sp	oouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)	I	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
12/18/2020	Fibich and Associates Contributor address; City; State; Zip Code		\$2,500.00
	Contributor address, City, State, Zip Code		
	Houston, TX 77005		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date 11/02/2020	Full name of contributor out-of-state PAC (ID#: Gibson, Casey Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$1,000.00
	Houston, TX 77098		
	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's employer/law firmLaw firm ofGibson Law FirmGibson La			oouse (if any)
	s a child, law firm of parent(s) (if any)		
	hy Taylog Ethiog Commission		Varaian V(1.1. aaffd00a

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1:
		Sch: 3/6 Rpt: 6/19	
2 FILER NAME Elliott Thornt	on, Cheryl N. (Ms.)		3 Filer ID (Ethics Commission Filers) 00084338
4 Date	5 Full name of contributor out-of-state PAC (ID#	:)	7 Amount of Contribution (\$)
10/30/2020	Gibson, Jason		\$2,000.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77098		
	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's e		11 Law firm of contributor's sp	bouse (if any)
Gibson Law		Gibson Law Firm	
12 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 (\$)
12/30/2020	Hall Maines Lugrin, PC		\$2,500.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77056		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	
Contributors e		Law IIIII of contributor 5 S	
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 (\$)
12/27/2020	Hurley Jr., R. Bruce	·/	\$625.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77024		
Contributor's F	Principal Occupation	Contributor's Job Title	1
Attorney		Partner	
Contributor's e	employer/law firm	Law firm of contributor's s	oouse (if any)
King & Spalding			
If contributor is	s a child, law firm of parent(s) (if any)		
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The Instruc	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 4/6 Rpt: 7/19	
2 FILER NAME Elliott Thornt	on, Cheryl N. (Ms.)		3 Filer ID (Ethics Commission Filers) 00084338
4 Date 12/23/2020	5 Full name of contributor out-of-state PAC (ID#: Kastl, Krisi		7 Amount of Contribution (\$) \$125.00
	6 Contributor address; City; State; Zip Code		
	Dallas, TX 75204	9 Contributor's Job Title	
8 Contributor's F Attorney	Principal Occupation		
10 Contributor's e	mployer/law firm	<b>11</b> Law firm of contributor's sp	oouse (if any)
Kastl Law		Kastl Law PC	
12 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 (\$)
12/18/2020	Norton Rose Fulbright US LLP Texas Committe		\$2,500.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77010		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	mployer/law firm	Law firm of contributor's sp	oouse (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; State; Zip Code		
	Houston, TX 77046		
	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
	mployer/law firm	Law firm of contributor's sp	oouse (if any)
	ssociates LLP		
If contributor is	s a child, law firm of parent(s) (if any)		
Eorms provided	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V1.1.ceffd98a

			1 Total pages Schedule A(J)1:
The Instruc	ction Guide explains how to complete this f	Sch: 5/6 Rpt: 8/19	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Elliott Thornt	on, Cheryl N. (Ms.)		00084338
4 Date	<b>5</b> Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
12/20/2020	Ware Jackson		\$500.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77019	I	
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
10 Contributorio o	mployor/low firm	11 Low firm of contributor's or	
10 Contributor's e		<b>11</b> Law firm of contributor's sp	Jouse (II ally)
<b>12</b> 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 (\$)
11/10/2020	Womack, Gerald	······	\$500.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77004		
Contributor's F	Principal Occupation	Contributor's Job Title	•
Real Estate I	Developer	Owner	
	mployer/law firm	Law firm of contributor's sp	bouse (if any)
Womack Dev			
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 (\$)
12/29/2020	Yetter Coleman LLP		\$1,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77002		
Contributor's E	Principal Occupation	Contributor's Job Title	
Contributor 5 1			
Contributor's e	mployer/law firm	Law firm of contributor's sp	pouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)	•	
	ny Tayaa Ethiaa Commission		Version VI 1 coffd00c

## MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 **1** Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 6/6 Rpt: 9/19 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Elliott Thornton, Cheryl N. (Ms.) 00084338 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 7 12/23/2020 \$5,000.00 Zavitsanos, John 6 Contributor address; City; State; Zip Code Houston, TX 77024 Contributor's Principal Occupation 9 Contributor's Job Title 8 Attorney Partner 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) AZA Law 12 If contributor is a child, law firm of parent(s) (if any)

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - I Comr	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex hittee Legal Services The Instruction Guid		Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Travel in District Travel Out of Distri	ipment & Related Expense
1	Total pages Schedule F1:	<b>2</b> F	ILER NAME				3	Filer ID (	(Ethics Commission Filers)
	Sch: 1/10 Rpt: 10/19		Elliott Thornton, Cheryl N. (M	s.)				00084338	, , , , , , , , , , , , , , , , , , ,
4	Date	5 F	ayee name						
	10/30/2020		cademy Awards						
6	Amount (\$)	<b>7</b> F	ayee address; City;	State;	; Zip Coo	le			
	\$230.44	4	106 Fannin						
		ŀ	louston, TX 77004						
8	PURPOSE					(h) Description			
ľ	OF		Category (See Categories listed at the t Advertising Expense	top of this sch	edule)	(b) Description Check if travel	outs	ide of Texas. Comple	ete Schedule T.
	EXPENDITURE	<i>′</i>						, officeholder living ex	
						t-shirts			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ndidate/Officeholder name	C	Dffice soug	ht		Office held	1
	Date	F	ayee name						
	12/16/2020		mazon						
	Amount (\$)		ayee address; City;	State	· Zin Cor				
	\$118.95	4	10 Terry Ave. N						
		Ş	eattle, WA 98109						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the loft of the Category (See Categories listed at the loft of the Category Category Category (See Categories listed at the loft of the Category Cat		edule)		ı, TX	ide of Texas. Comple , officeholder living ex	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Dffice soug	ht		Office held	1
	Date	F	ayee name						
	10/26/2020		Blake, Gloria						
	Amount (\$)		ayee address; City;	Stato	; Zip Co				
			413 Parker Rd.	Sidle,	, zip cou	le			
	\$3,900.00		415 Paikei Ru.						
		ŀ	louston, TX 77016						
	PURPOSE	(a) (	Category (See Categories listed at the	op of this sch	edule)	<b>b)</b> Description			
	OF EXPENDITURE	5	alaries/Wages/Contract Lab	or			ı, TX	ide of Texas. Comple , officeholder living e: <b>ErVISO</b>	
-	Complete ONLY if direct	 	ndidate/Officeholder name	ſ	Dffice soug	ht		Office held	1
	expenditure to benefit C/OI				2				
-									

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-	Office O Polling E Printing Salaries	overhea Expens Expens Wages	se s/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 explain	is how to c	compl	ete this form.		
1	Total pages Schedule F1:	2					3	Filer ID (Ethics Commission Filers)
	Sch: 2/10 Rpt: 11/19		Elliott Thornton, Cheryl N. (Ms.)					00084338
4	Date	5	Payee name					
	11/10/2020		Blake, Gloria					
6	Amount (\$)	7	Payee address; City; Sta	te; Zip C	Code			
	\$4,040.00		7413 Parker Rd.					
			Houston, TX 77016					
_	DUDDOCE	(-)			(1)			
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	schedule)	(a)	Description	outsi	de of Texas. Complete Schedule T.
	EXPENDITURE		Salaries/Wages/Contract Labor					officeholder living expense
						Poll worker s		
9	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeholder name	Office so	bught			Office held
	Date		Payee name					
	11/10/2020		Blake, Gloria					
	Amount (\$)			te; Zip C	`ode			
	\$3,050.00		7413 Parker Rd.	ιο, <i>Σ</i> ιρ ο	Jouc			
	\$3,030.00		1413 Faikei Ku.					
			Houston, TX 77016					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this salaries/Wages/Contract Labor	schedule)	(b)			de of Texas. Complete Schedule T. officeholder living expense
						Poll worker s	upe	ervisor
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name	Office so	ought			Office held
	Date		Payee name					
	11/09/2020		Blue Beam LLC					
	Amount (\$)		Payee address; City; Sta	te; Zip C	Code			
	\$3,000.00		1510 Eldridge Pkwy	· •				
			5 ,					
			Houston, TX 77077					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description	outoi	de of Texas. Complete Schedule T.
	EXPENDITURE		Advertising Expense				, TX,	officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O		candidate/Officeholder name	Office so	bught			Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense         Trai           Food/Beverage Expense         Polling Expense         Trai           Gift/Awards/Memorials Expense         Printing Expense         Trai						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 3/10 Rpt: 12/19		Elliott Thornton, Cheryl N. (Ms.)					00084338			
4	Date	5	Payee name								
	11/30/2020		Braintree								
6	Amount (\$)	7	Payee address; City; State; Zip Code								
	\$156.36		7700 W Parmer Ln								
			Bld. D								
			Austin, TX 78729								
8	PURPOSE	(a)			(b)	Description					
-	OF		Category (See Categories listed at the top of this so Fees	chequie)	(-)		outsi	de of Texas. Complete Schedule T.			
	EXPENDITURE							officeholder living expense			
						credit card fe	es				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ıght			Office held			
	Date		Payee name								
	12/31/2020		Braintree								
	Amount (\$)		Payee address; City; Stat	e; Zip Co	ode						
	\$43.87		7700 W Parmer Ln								
			Bld. D								
			Austin, TX 78729								
	PURPOSE	(a)	Category (See Categories listed at the top of this se	chedule)	(b)	Description					
	OF EXPENDITURE		Fees					de of Texas. Complete Schedule T.			
						Check if Austin		officeholder living expense			
						credit card le	es				
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	laht			Office held			
	expenditure to benefit C/OF		andidate/Onicenoider name	Once sou	iyin			Office field			
	Data										
	Date 12/16/2020		Payee name Choir Robes Creation								
				7.0							
	Amount (\$)			e; Zip Co	bue						
	\$344.00		3804 Poplar								
			Houston, TX 77087								
	PURPOSE	(a)	Category (See Categories listed at the top of this se	chedule)	(b)	Description					
	OF EXPENDITURE		Office Overhead/Rental Expense					de of Texas. Complete Schedule T.			
						official robes	, IX,	officeholder living expense			
-	Complete ONLY if direct	<u>ر</u>	Candidate/Officeholder name	Office sou	l Iaht			Office held			
	expenditure to benefit C/OF			2	9						
-											

EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense           Food/Beverage Expense         Polling Expense           y -         Gift/Awards/Memorials Expense						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2				• • • • • •	3	Filer ID (Eth	nics Commission Filers)			
-	Sch: 4/10 Rpt: 13/19		Elliott Thornton, Cheryl N. (Ms.)				ľ	00084338				
4	Date 11/03/2020	5	Payee name Fontenet, Adam									
6	Amount (\$)	7	Payee address; City;	State; Zi	n Cor	e						
	\$720.00	-	7440 Hwy 6		p 000	•						
	\$120.00		#1104									
			Hitchcock, TX 77563									
8	PURPOSE OF	(a)	Category (See Categories listed at the top of	of this schedule	) (	b) Description						
	EXPENDITURE		Salaries/Wages/Contract Labor					ide of Texas. Complete S				
						poll worker	n, TX, officeholder living expense					
						poir Worker						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office	e soug	ht		Office held				
	Date		Payee name									
	11/10/2020		Fontenet, Adam									
_	Amount (\$)		Payee address; City;	State; Zi	p Coc	e						
	\$800.00		7440 Hwy 6	,								
	+000100		#1104									
			-									
			Hitchcock, TX 77563									
	PURPOSE OF	(a)	Category (See Categories listed at the top of	of this schedule	)	b) Description						
	EXPENDITURE		Salaries/Wages/Contract Labor					ide of Texas. Complete S , officeholder living exper				
						poll worker	1, 17	, oneenolder iving exper				
						pen neme						
	Complete ONLY if direct		Candidate/Officeholder name	Office	e soug	ht		Office held				
	expenditure to benefit C/OI			Onice	c soug	in the second seco		Office field				
		-										
	Date		Payee name									
	10/28/2020		Herald Publishing									
	Amount (\$)		Payee address; City;	State; Zij	p Coc	e						
	\$265.00		PO Box 153									
			Houston, TX 77001									
	PURPOSE	(a)	Category (See Categories listed at the top of	of this schedule	. (	b) Description						
	OF		Advertising Expense		, 		outs	ide of Texas. Complete S	Schedule T.			
	EXPENDITURE		5			Check if Austin	n, TX	, officeholder living exper	nse			
						Ad						
L												
	Complete ONLY if direct		Candidate/Officeholder name	Office	e soug	ht		Office held				
	expenditure to benefit C/OI	H										

EXPENDITURE CATEGORIES FOR BOX 8(a)											
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment			Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense al Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2		2	Filer ID (Ethics Commission Fil	ers)					
-	Sch: 5/10 Rpt: 14/19		Elliott Thornton, Cheryl N. (Ms.)					00084338	(13)		
4	Date	5	Payee name								
	11/27/2020		Herald Publishing								
6	Amount (\$)	7	Payee address; City; S	State;	Zip Code	) )					
	\$377.50		PO Box 153								
			Houston, TX 77001								
•	DUDDOCE										
8	PURPOSE OF	(a)	Category (See Categories listed at the top of t	his schedu	ule) (I	Description	outo	ide of Texas. Complete Schedule T.			
	EXPENDITURE		Advertising Expense								
						Check if Austin, TX, officeholder living expense					
_	Ormaniata ONILV/ if alias at			0"							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Off	ice sough	IT		Office held			
	Date		Payee name								
	11/03/2020		Hill-Fontenet, Vernisha								
_	Amount (\$)		Payee address; City; S	State:	Zip Code	2					
	\$720.00		7440 Hwy 6	,		-					
	ψ120.00		•								
			#1104								
			Hitchcock, TX 77563								
	PURPOSE	(a)	Category (See Categories listed at the top of t	his schedu	ule) (I	) Description					
	OF EXPENDITURE		Salaries/Wages/Contract Labor					ide of Texas. Complete Schedule T.			
							I, TX	, officeholder living expense			
						poll worker					
	Complete ONLY if direct		Candidate/Officeholder name	Off	ice sougł	it		Office held			
	expenditure to benefit C/OI	П									
	Date		Payee name								
	11/10/2020		Hill-Fontenet, Vernisha								
	Amount (\$)		Payee address; City; S	State <sup>.</sup>	Zip Code	2					
	\$800.00		7440 Hwy 6	olulo,	210 0000						
	φ000.00		-								
			#1104								
			Hitchcock, TX 77563								
	PURPOSE	(a)	Category (See Categories listed at the top of the	his schedu	ule) (I	) Description					
	OF EXPENDITURE		Salaries/Wages/Contract Labor					ide of Texas. Complete Schedule T.			
	LAFENDITORE						і, ТХ	, officeholder living expense			
						poll worker					
	Complete ONLY if direct		andidate/Officeholder name	Off	ice sough	it		Office held			
	expenditure to benefit C/OI	Н									

EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reim Fees Office Overhead/Renta Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contra The Instruction Guide explains how to complete this	Il Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Act Labor OTHER (enter a category not listed above)				
1	Total pages Schedule F1:		<b>3</b> Filer ID (Ethics Commission Filers)				
-	Sch: 6/10 Rpt: 15/19	Elliott Thornton, Cheryl N. (Ms.)	00084338				
4	Date	Payee name					
	11/03/2020	Hughes, Melanie					
6	Amount (\$)	Payee address; City; State; Zip Code					
	\$875.00	5719 Reed Rd.					
		Houston, TX 77033					
8	PURPOSE		rintion				
ľ	OF		heck if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE		heck if Austin, TX, officeholder living expense				
		poll	worker				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	11/10/2020	Hughes, Melanie					
_	Amount (\$)	Payee address; City; State; Zip Code					
	\$725.00	5719 Reed Rd.					
		Houston, TX 77033					
	PURPOSE OF EXPENDITURE		cription heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense				
			worker				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	12/30/2020	Krogers					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$155.66	4000 Polk St.					
		Houston, TX 77023					
	PURPOSE OF	Category (See Categories listed at the top of this schedule) (b) Desc					
	EXPENDITURE		heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense I for swearing in celebration				
-	Complete ONLY if direct	andidate/Officeholder name Office sought	Office held				
	expenditure to benefit C/OI						

EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense						Transportation E Travel in District Travel Out of Dis			
1	Total pages Schedule F1:						2	Filer ID	(Ethics Commission Filers)		
-	Sch: 7/10 Rpt: 16/19		hornton, Cheryl N. (N	1s.)				00084338			
4	Date	Payee n	ame								
	12/30/2020	Meza, A	Angelica								
6	Amount (\$)	Payee a	ddress; City;	State;	; Zip Co	de					
	\$150.00	123 Re	quested								
		Housto	n, TX 77007								
8	PURPOSE	a) Categor	✓ (See Categories listed at the	ton of this sch	nedule)	(b) Description					
	OF EXPENDITURE		s/Wages/Contract Lal		icuaic)		loutsi	de of Texas. Com	plete Schedule T.		
	EXPENDITORE		-					officeholder living			
						help with swe	earii	ng in celebration			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate	e/Officeholder name	C	Office sou	ght		Office h	eld		
	Date	Payee n	ame								
	12/30/2020	Party C	ity								
	Amount (\$)	Payee a	ddress; City;	State	; Zip Co	de					
	\$74.58	3225 S	outhwest Fwy.								
			-								
		Housto	n, TX 77027								
	PURPOSE OF		(See Categories listed at the		nedule)	(b) Description					
	EXPENDITURE	Office C	Overhead/Rental Expe	ense				officeholder living	plete Schedule T. g expense		
						supplies for s					
								0			
	Complete ONLY if direct	Candidate	e/Officeholder name	(	Dffice sou	ght		Office h	eld		
	expenditure to benefit C/OI										
	Date	Payee n	ame								
	11/03/2020	Smith,									
	Amount (\$)	Payee a	ddress; City;	State	; Zip Co	de					
	\$860.00	2810 62			, 1						
		Galvest	on, TX 77550								
	PURPOSE OF		(See Categories listed at the		iedule)	(b) Description					
	EXPENDITURE	Salaries	s/Wages/Contract La	oor					plete Schedule T.		
						poll worker	n, IX,	officeholder living	j expense		
-	Complete ONLY if direct	Candidate	e/Officeholder name		Office sou	aht		Office h	əld		
	expenditure to benefit C/OI	Canuluale		(	Since SUU	grit		Unice III	u		

				EXPENDITU	RE CATEGO	RIES FOF	R BO	X 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		F F O nmittee L	vent Expense ees ood/Beverage Expe ift/Awards/Memorial egal Services	s Expense	Office Ove Polling Ex Printing Ex Salaries/W	erhead/ pense (pense /ages/(	Contract Labor		Travel in District Travel Out of Dis	quipmei strict	Expense nt & Related Expense ry not listed above)	
_		-		he Instruction G	uide explains	now to co	mplet	e this form.	_				,
1	Total pages Schedule F1:	2							3	Filer ID	(Ethio	cs Commission Filers	5)
	Sch: 8/10 Rpt: 17/19		Elliott Thornt	on, Cheryl N.	(Ms.)					00084338			
4	Date	5	Payee name										
	11/10/2020		Smith, John										
6	Amount (\$)	7	Payee address	; City;	State	; Zip Co	de						
	\$700.00		2810 61st St										
			Galveston, T	X 77550									
8	DUDDOSE						(h) (	D					
ð	PURPOSE OF	(a)		Categories listed at		edule)	(u) 1	Description	nutsir	de of Texas. Com	nlete Sc	hedule T	
	EXPENDITURE		Salaries/waų	jes/Contract L	auui		ř			officeholder living			
								 poll worker					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offic	eholder name	C	Office sou	ght			Office he	eld		
	Date		Payee name										
	10/29/2020		Sprint2Print										
	Amount (\$)	-	Payee address	; City;	State	; Zip Co	do						
	.,				Siale	, zip co	ue						
	\$1,082.50		8748 Clay R	1.									
			Houston, TX	77080									
	PURPOSE OF	(a)	Category (See	Categories listed at	the top of this sch	edule)	(b)	Description					
	EXPENDITURE		Printing Expe	ense			ļ			de of Texas. Com			
							L	push cards	, 1,,	officeholder living	) expens	se	
							I	push calus					
	Complete ONILV if direct		Devediale to /Office							Office h	-   el		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	enoluer name	(	Office sou	yni			Office he	eiu		
		-											
	Date		Payee name										
	12/30/2020		Total Wine &	More									
	Amount (\$)		Payee address	; City;	State	; Zip Co	de						
	\$112.81		2857 Katy Fv	vy.									
			Houston, TX	77007									
	PURPOSE	(a)	Category (See	Categories listed at	the ten of this coh	odulo)	(b) I	Description					
	OF		Food/Bevera		the top of this son	ieuuie)	[	-	outsid	de of Texas. Com	plete Sc	chedule T.	
	EXPENDITURE		1 000/201010	go Experiee			Ī	Check if Austin,	, TX,	officeholder living	g expens	se	
							I	refreshments	for	swearing ir	n cele	bration	
	Complete ONLY if direct		Candidate/Offic	eholder name	(	Office sou	ght			Office he	eld		
	expenditure to benefit C/OI	Н											

EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment			Fees         Office Overhead/Rental Expense         Transportation Equipment & Rel           Food/Beverage Expense         Polling Expense         Travel in District           Gift/Awards/Memorials Expense         Printing Expense         Travel Out of District						
1	Total pages Schedule F1:	2						3	Filer ID (Ethics Commission Filers)
-	Sch: 9/10 Rpt: 18/19		Elliott Thornton, Cheryl N. (Ms.)					5	00084338
4	Date	5	Payee name						
	10/27/2020		USPS						
6	Amount (\$)	7	Payee address; City;	State	; Zip Co	de			
	\$130.00		1500 Hadley St.						
			Houston, TX 77002						
8	PURPOSE	(a)	Category (See Categories listed at the top of	f this coh	odulo)	(b) г	Description		
-	OF		Office Overhead/Rental Expense		ieuuie)	Γ		outsio	de of Texas. Complete Schedule T.
	EXPENDITURE					Ē	Check if Austin,	TX,	officeholder living expense
						F	PO Box		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder name	C	Office sou	ght			Office held
	Date		Payee name						
	12/10/2020		Vaskey Media Group						
	Amount (\$)		Payee address; City;	State	; Zip Co	de			
	\$378.00		7322 Southwest Fwy.						
			Houston, TX 77074						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of Advertising Expense	f this sch	nedule)				de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	(	Office soug	ght			Office held
	Date		Payee name						
	11/19/2020		Vidor, Erik						
	Amount (\$)		Payee address; City;	State	; Zip Co	de			
	\$1,021.00		707 Robin St.	outo	, <u>_</u> .p ee	ao			
	\$1,0 <u>2</u> 1.00								
			Houston, TX 77019						
	PURPOSE	(a)	Category (See Categories listed at the top of	f this sch	nedule)	(b) [	Description		
	OF EXPENDITURE		Consulting Expense			[ [ F		TX,	de of Texas. Complete Schedule T. officeholder living expense compliance
	Complete ONLV if direct	Ļ	andidate/Officebolder name	-	Office cour	tdr			Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ynt			Onice neid

EXPENDITURE CATEGORIES FOR BOX 8(a)											
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment									uipment & Related Expense rict		
1	Total pages Schedule F1:	2		•		·		3	Filer ID	(Ethics Commission Filers)	
-	Sch: 10/10 Rpt: 19/19		Elliott Thornton, Cheryl N. (Ms.)	)					00084338		
4	Date	5	Payee name								
	12/16/2020		Vidor, Erik								
6	Amount (\$)	7	Payee address; City;	State	; Zip Co	de					
	\$1,000.00		707 Robin St.								
			Houston, TX 77019								
8	PURPOSE	(a)	Category (See Categories listed at the top	of this sch	nedule)	(b) Descript					
	OF EXPENDITURE		Consulting Expense						e of Texas. Comp		
	-						, officeholder living expense				
						Fundral	ising a	na	compliance		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	(	Dffice sou	ght			Office he	ld	
	Date		Payee name								
	11/03/2020		Woodralon, Wilson								
	Amount (\$)	-	Payee address; City;	State	; Zip Co	10					
	\$875.00		4310 Joms	Oluic	, 20 00						
	\$675.00		4310 30115								
			Houston, TX 77045								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top Salaries/Wages/Contract Labor		nedule)		if travel of the state of the s		e of Texas. Comp officeholder living		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	(	Office sou	ght			Office he	ld	
	Date		Payee name								=
	11/10/2020		Woodralon, Wilson								
	Amount (\$)		Payee address; City;	State	; Zip Co	de					
	\$725.00		4310 Joms								
			Houston, TX 77045								
	PURPOSE	(a)	Category (See Categories listed at the top	of this sch	nedule)	(b) Descript	tion				
	OF EXPENDITURE		Salaries/Wages/Contract Labor				if Austin,		e of Texas. Comp officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	(	Office sou	ght			Office he	ld	