FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00081820 40 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY** OFFICEHOLDER The Honorable Janice L. NAME Date Received **ELECTRONICALLY FILED** 07/15/2021 NICKNAME LAST SUFFIX

	Berg	9		
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUIT	E#; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER MAILING	5161 San Felipe St			,
ADDRESS	Ste. 320-176			Receipt # Amount
Change of Address	Houston, TX 77056			Date Processed
				Date Imaged
5 CAMPAIGN	MS / MRS / MR FIRS	T		MI
TREASURER NAME	Ms. Paul	a		
	NICKNAME LAST	-		SUFFIX
	Arno	ld		
6 CAMPAIGN	STREET ADDRESS (NO PO BOX I	DI EASE). AD	Γ / SUITE #; CITY;	STATE; ZIP CODE
TREASURER ADDRESS	102 Windcrest Ct.	rllnol), Ar	1730HL#, CH1,	STATE, ZIF CODE
(Residence or Business)	Jersey Village, TX 77064			
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUI (713) 962-1905	MBER EXTENSION		
8 REPORT TYPE	January 15 30	th day before election	Runoff	15th day after campaign treasurer appointment (officeholder only)
	X July 15 8th	day before election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)
9 PERIOD	Month Day Year		Month Day	Year
COVERED	01/01/2021	THROUGH	06/30/202	1
10 ELECTION	ELECTION DATE	1	ELECTION TYPE	
	Month Day Year	X Primary	Runoff	Other
	03/01/2022	General	Special	_
			ш.	
11 OFFICE	OFFICE HELD (if any)	1	12 OFFICE SOUGHT	(if known)
	Family District Court Judge Dist	rict 247	Family District Co	ourt Judge District 247
	I .		l	
		GO TO PAGE 2		
Forms provided by Te	xas Ethics Commission	www.ethics.state.tx.u	S	Version V1.1.83d66148

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 40

13 C / OH NAME	Berg, Janice L. (The	Honorable)	14 Filer ID (00081820	Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	FROM candidate / officeholder. These expenditures may have been made without the candidate's or office consent. Candidates and officeholders are required to report this information only if they receive no					
Additional Pages						
	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS			
46 CONTIDUTION	1 TOTAL UNITEM	ZED DOUTICAL CONTRIBUTIONS/OTLIED THA	N. D. EDOES, LOANS			
16 CONTIBUTION TOTALS	OR GUARANTE	ZED POLITICAL CONTRIBUTIONS(OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00		
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	16)	\$ 49,880.00		
EXPENDITURE TOTALS	`	ZED POLITICAL EXPENDITURES	,	\$ 0.00		
	4. TOTAL POLIT	CAL EXPENDITURES		\$ 6,459.55		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 104,463.65		
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 penal true and correct and includes a under Title 15, Election Code.				
		The Hor	norable Janice L. Berg	g		
		Signature o	of Candidate or Officehol	der		
AFFIX NOT	TARY STAMP / SEAL AB	DVE				
Sworn to and subso	cribed 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 officer	administering oath		

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

				VER SHEET	3 of 40
Ber	ER NAM rg, Jani	(Ethics Commission	ı Filers)		
l	HEDULE ME OF S	SUBTOTAL AI	MOUNT		
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	49,880.00
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	\$	6,267.79
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.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	191.76
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 CON	NTRIBUTIC	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to c	complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 1/20 Rpt: 4/40
2	FILER NAME Berg, Janice	L. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00081820
4	Date 06/10/2021	Date 5 Full name of contributor out-of-state PAC (ID#:) 7		7 Amount of Contribution (\$) \$1,000.00	
		Jersey Village, TX 77064			
8		Principal Occupation		9 Contributor's Job Title	
	Not Employe			Not Employed	
10	Not Employe	employer/law firm ed		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 0	ut-of-state PAC (ID#:_)	Amount of Contribution (\$)
	O6/28/2021 Asmus, Charlotte Contributor address; City; State; Zip Code Houston, TX 77056			\$500.00	
Contributor's Principal Occupation Contributor's Job Title					
	Attorney Attorney				
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)
	The Rainwat	er Firm			
	If contributor is	s a child, law firm of parent(s) (if any)			
	Date	Full name of contributor 0	ut-of-state PAC (ID#:_)	Amount of Contribution (\$)
	06/30/2021 Baughman, Bruce Contributor address; City; State; Zip Code Baytown, TX 77521			. \$500.00	
	Contributor's F	Principal Occupation		Contributor's Job Title	•
	Attorney			Attorney	
	Contributor's employer/law firm Law firm of contributor's sp Self			pouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	1 Total pages Schedule A(J)1: Sch: 2/20 Rpt: 5/40		
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Berg, Janice	e L. (The Honorable)			00081820
4 Date 5 Full name of conf		5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	05/21/2021	Berg, David			\$1,000.00
		6 Contributor address; City; Houston, TX 77002	State; Zip Code		
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
	Lawyer			Partner	
10	Contributor's	employer/law firm		11 Law firm of contributor's s	spouse (if any)
	Berg & Andr	rophy			
12	If contributor i	is a child, law firm of parent(s) (if any)	1	
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	05/18/2021	Berg, Geoff			\$5,000.00
		Contributor address; City;	State; Zip Code		"
		Houston, TX 77019			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Lawyer			Partner	
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	Berg Plumm	ner Johnson & Raval, Llp			
	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor	out-of-state PAC (ID#:		Amount of Contribution (\$)
	05/18/2021	Black Levine, Barbara			\$50.00
		Contributor address; City;	State; Zip Code		
		Houston, TX 77046			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Not Employe	ed		Not Employed	
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	Not Employe	ed			
	If contributor i	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 3/20 Rpt: 6/40
2	FILER NAME	I (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081820
4	Date 06/14/2021			7	Amount of Contribution (\$) \$50.00	
		Houston, TX 77046				
8		Principal Occupation		9 Contributor's Job Title		
	Not Employe			Not Employed		
10	O Contributor's e Not Employe	employer/law firm ed		11 Law firm of contributor's sp	oou	se (if any)
12		s a child, law firm of parent(s) (if	f any)	1		
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Т	Amount of Contribution (\$)
	06/30/2021 Bruman, Steven Contributor address; City; State; Zip Code				\$500.00	
		Spring, TX 77379		T		
		Principal Occupation		Contributor's Job Title		
	Attorney			Owner & Manager		
	Bruman Law	employer/law firm		Law firm of contributor's sp Law Office Of Elizabeth		
		s a child, law firm of parent(s) (if	f any)	Eaw Office of Elizabeth		uman, rc.
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
06/07/2021 Burgower, Wendy Contributor address; City; State; Zip Code Houston, TX 77024			\$500.00			
		Principal Occupation		Contributor's Job Title		
	Attorney			Partner		
	Contributor's employer/law firm Law firm of contributor's sp			oou	se (if any)	
	Schlanger S					
	If contributor is	s a child, law firm of parent(s) (if	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE	A(J)1
	The Instruction Guide explains how to complete this form.					l pages Schedule A(J)1 : 4/20 Rpt: 7/40	:
2	FILER NAME Berg. Janice	L. (The Honorable)			1	ID (Ethics Commissi 81820	on Filers)
4	Date 06/30/2021	5 Full name of contributor out-of-state PAC (ID#:) 7			unt of Contribution (\$)	\$500.00	
		Sugar Land, TX 77478					
8		Principal Occupation		9 Contributor's Job Title			
	Attorney			Attorney			
10	Contributor's e Burkett Law	employer/law firm Office PLLC		11 Law firm of contributor's sp	oouse (if a	any)	
12	! If contributor is	s a child, law firm of parent(s) (i	f any)	1			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amo	unt of Contribution (\$)	
	06/30/2021 Canales, Claudia Contributor address; City; State; Zip Code					\$500.00	
		Pearland, TX 77581					
		Principal Occupation		Contributor's Job Title			
	Attorney			Owner			
		employer/law firm of Claudia Canales		Law firm of contributor's sp	oouse (ii a	ariy)	
		s a child, law firm of parent(s) (i	f any)				
	ii contributor i	o a orma, law mm or paremiles (any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amo	unt of Contribution (\$)	
	06/08/2021	Clevenger, George	_				\$1,000.00
Contributor address; City; State; Zip Code Spring, TX 77379							
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Attorney	molpai Goodpailon		Attorney			
		employer/law firm		Law firm of contributor's sp	oouse (if a	any)	
	Clevenger L	aw Firm, P.C.					
	If contributor is	s a child, law firm of parent(s) (i	f any)	1			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 5/20 Rpt: 8/40
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Berg, Janice	L. (The Honorable)			00081820
4	Date 05/18/2021	5 Full name of contributor Crump, Stephanie	out-of-state PAC (ID#	:)	7 Amount of Contribution (\$) \$1,000.00
		6 Contributor address; City; State; Zip Code			
		Houston, TX 77008			
8	Contributor's I Attorney	Principal Occupation		Contributor's Job Title Principal	
10	Contributor's of Mckiernan C	employer/law firm		11 Law firm of contributor's s Harris County District	
12		s a child, law firm of parent(s) (if any)	Tiams County District	, attorney a chiec
		- u ,	,,		
F	Date	Full name of contributor	out-of-state PAC (ID#	··)	Amount of Contribution (\$)
	06/30/2021	Daughtry, Alan	out or state 1 Ae (15#		\$1,000.00
		Contributor address; City;	State: Zin Code		
		Houston, TX 77024			
		Principal Occupation		Contributor's Job Title	
	lawyer			lawyer	
		employer/law firm		Law firm of contributor's s	spouse (if any)
	self employe		: · · · ·		
	ii contributor i	s a child, law firm of parent(s) (ıı any)		
_	Date	Full name of contributor	out-of-state PAC (ID#	::)	Amount of Contribution (\$)
	06/25/2021	DeLuca, Matt			\$500.00
		Contributor address; City;	State; Zip Code		···[
		Houston, TX 77008			
	Contributor's I	Principal Occupation		Contributor's Job Title	1
	Attorney			Attorney	
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	Law Office o	f Matt DeLuca			
	If contributor i	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 6/20 Rpt: 9/40
2	FILER NAME Berg, Janice	L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081820
4	Date 06/14/2021	 5 Full name of contributor out-of-state PAC (ID# Diggs, Cynthia 6 Contributor address; City; State; Zip Code Houston, TX 77007 	:)	7 Amount of Contribution (\$) \$2,500.00
8	Contributor's F	Principal Occupation	9 Contributor's Job Title	
Ü	Attorney	Timelpai Occupation	Managing Shareholder	
10		employer/law firm	11 Law firm of contributor's sp	nouse (if any)
10	Holmes, Dig	• •	11 Law IIIII of Contributor's Sp	louse (ii ariy)
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 (\$)
	06/17/2021	Doyle, Restrepo, Harvin & Robbins LLP Contributor address; City; State; Zip Code Houston, TX 77002	\$250.00	
Contributor's Principal Occupation Contributor's Job Title				
	Contributor 5 i	Tillopal Goodpation	Contributor 3 dob Title	
	Contributor's 6	employer/law firm	Law firm of contributor's sp	ouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)	. L	
	Date	Full name of contributor out-of-state PAC (ID#	::)	Amount of Contribution (\$)
	06/29/2021 Evans, Sherri Contributor address; City; State; Zip Code Houston, TX 77024		\$2,500.00	
	Contributor's I	Principal Occupation	Contributor's Job Title	
	Attorney Managing Shareholder			
	Contributor's employer/law firm Law firm of contributor's sp			ouse (if any)
	KoonsFuller	Houston		
	If contributor is	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 7/20 Rpt: 10/40
2	FILER NAME Berg, Janice	L. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081820
4			7	Amount of Contribution (\$) \$1,000.00		
		Houston, TX 77007				
8		Principal Occupation		9 Contributor's Job Title		
10	Lawyer	and a conflored fines		Owner		and (if any)
10	Kelly L. Frits	employer/law firm ch, P.C.		11 Law firm of contributor's sp	ous	se (II any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/25/2021 Ghutzman, Phillip Contributor address; City; State; Zip Code			-	\$1,000.00	
	O a materilla cata and a 1	Houston, TX 77043		Occasilla de de Tida		
	Lawyer	Principal Occupation		Contributor's Job Title Lawyer		
		employer/law firm		Law firm of contributor's sp	enouse (if any)	
		fPhillipG.Ghutzman, PLLC		Law iiiii oi continuatoi 3 3	Jou.	se (ii diiy)
		s a child, law firm of parent(s) (i	f any)	<u> </u>		
=	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)
	O6/23/2021 Golub, Andrew Contributor address; City; State; Zip Code			\$500.00		
		Houston, TX 77046				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Attorney			Partner		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
		Remels & Beverly		Schlanger Silver		
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains hov	v to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 8/20 Rpt: 11/40
2	FILER NAME Berg. Janice	L. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00081820
4				7 Amount of Contribution (\$) \$250.00	
_	0	Bellaire, TX 77401		O Contributanta 1-1- Title	
8		Principal Occupation		9 Contributor's Job Title Of Counsel	
40	Attorney				Ct - m A
10	Tindall Engla	employer/law firm and		11 Law firm of contributor's sp Beck Redden	pouse (ii any)
12		s a child, law firm of parent(s) (if a	any)	Book Roudon	
_	Data	Full name of contributor	D and of state BAC (ID)		Amount of Contribution (\$\text{\$\Psi}\$)
	Date Full name of contributor out-of-state PAC (ID#:) 05/20/2021 Gray, Daniel Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$750.00	
	Contributorio	Pearland, TX 77584		Contributor's Job Title	
	Attorney	Principal Occupation		Attorney	
		employer/law firm		Law firm of contributor's sp	nouse (if any)
		of Daniel N. Gray		Edw IIIII of contributor 5 5p	pouse (ii arry)
		s a child, law firm of parent(s) (if a	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	06/26/2021 Hirsch, Reginald Contributor address; City; State; Zip Code Houston, TX 77027			\$1,000.00	
	Contributor's F	Principal Occupation		Contributor's Job Title	•
	Partner			Owner	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	Law Office of Reginald A. Hirsch Schlanger Silver				
	If contributor is	s a child, law firm of parent(s) (if a	any)		

	MONET	ARY POLITICAL CONT	RIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to cor	nplete this f	orm.	1 Total pages Schedule A(J)1: Sch: 9/20 Rpt: 12/40
2	FILER NAME Berg, Janice	L. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00081820
4				7 Amount of Contribution (\$) \$500.00	
		Houston, TX 77046		T	
8		Principal Occupation		9 Contributor's Job Title	
	Attorney			Attorney	
10		employer/law firm of Joel A Nass		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-o	of-state PAC (ID#:_)	Amount of Contribution (\$)
	06/30/2021 Hoffman, Robert Contributor address; City; State; Zip Code				\$1,500.00
	0	Houston, TX 77005		Occasionated to Title	
		Principal Occupation		Contributor's Job Title Attorney	
	Attorney			-	and the series
		employer/law firm of Robert S. Hoffman		Law firm of contributor's sp	ouse (ii ariy)
		s a child, law firm of parent(s) (if any)			
	Date	Full name of contributor out-o	f-state PAC (ID#:_)	Amount of Contribution (\$)
	06/14/2021 Indelicato, Jr., Joseph Contributor address; City; State; Zip Code Houston, TX 77098			\$500.00	
	Contributor's F	Principal Occupation		Contributor's Job Title	
	Attorney Managing Partner				
	Contributor's employer/law firm Law firm of contributor's sp				oouse (if any)
Joseph Indelicato, Jr., P.C.					
	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 to	complete this f	orm.	1	ages Schedule A(J)1: D/20 Rpt: 13/40	
2	FILER NAME Berg, Janice	L. (The Honorable)			3 Filer ID 000818	(Ethics Commissio	n Filers)
4	Date 06/30/2021	5 Full name of contributor James, Katherine6 Contributor address; City; StateThe Woodlands, TX 77380	out-of-state PAC (ID#:_ ; Zip Code		7 Amount	of Contribution (\$)	\$500.00
8	Contributor's F	Principal Occupation		9 Contributor's Job Title			
Ŭ	Attorney	Timopar Occupation		Trial Attorney			
10		employer/law firm		11 Law firm of contributor's sp	nouse (if any)	1	
	The James Law Firm		The James Law Firm	, , , , , , , , , , , , , , , , , , , ,	,		
12	12 If contributor is a child, law firm of parent(s) (if any)						
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount	of Contribution (\$)	
	06/28/2021 Krinsky, Dayle Contributor address; City; State; Zip Code Houston, TX 77056					\$100.00	
	Contributor's I	Principal Occupation		Contributor's Job Title	1		
	Not Employe	ed		Not Employed			
	Contributor's e	employer/law firm		Law firm of contributor's spouse (if any)			
		s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor	out-of-state PAC (ID#:_		Amount	of Contribution (\$)	
	Date Full name of contributor out-of-state PAC (ID#: 1					\$25.00	
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Attorney			Attorney			
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if any))	
	Law Office o	f Maria Lowry, PLLC					
	If contributor is	s a child, law firm of parent(s) (if any)					

	MONET	ARY POLITICAL		SCHEDULE A(J)1			
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 11/20 Rpt: 14/40	
2	FILER NAME Berg, Janice	L. (The Honorable)			1	Filer ID (Ethics Commission Filers) 00081820	
4	Date 06/28/2021	5 Full name of contributor Lowy, Peter 6 Contributor address; City;	out-of-state PAC (ID#:		_	Amount of Contribution (\$) \$50.00	
		Houston, TX 77024					
8		Principal Occupation		9 Contributor's Job Title			
	Attorney			Shareholder			
10		employer/law firm		11 Law firm of contributor's sp	oous	e (if any)	
_	Chamberlain Hrdlicka Hess Corporation 2 If contributor is a child, law firm of parent(s) (if any)						
12	If contributor is	s a child, law firm of parent(s) (i	rany)				
_	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2021 McFerren, Eric Contributor address; City; State; Zip Code			\$1,000.00			
		Richmond, TX 77407					
	Contributor's F	Principal Occupation		Contributor's Job Title			
	Attorney			Attorney			
		employer/law firm		Law firm of contributor's sp	oous	e (if any)	
	Anderson &						
	If contributor is	s a child, law firm of parent(s) (i	f any)				
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)	
	06/01/2021	McNamara, Brian		·		\$500.00	
	06/01/2021 McNamara, Brian Contributor address; City; State; Zip Code						
	0	Kingwood, TX 77339		I 0 . "			
	Lawyer	Principal Occupation		Contributor's Job Title Attorney			
		employer/law firm		Law firm of contributor's sp	20116	o (if any)	
		aw Office, Pllc		Law littl of contributors sp	Jous	e (II aliy)	
		s a child, law firm of parent(s) (i	f any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	tal pages Schedule A(J): h: 12/20 Rpt: 15/40	1:
2	FILER NAME Berg. Janice	L. (The Honorable)			1	er ID (Ethics Commissi 081820	ion Filers)
4	Date 06/25/2021	5 Full name of contributor Medland, Brad6 Contributor address; City;	out-of-state PAC (ID#:			nount of Contribution (\$)	\$2,500.00
		Houston, TX 77002					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
	Attorney			Attorney			
10		employer/law firm of Brad Medland		11 Law firm of contributor's sp	oouse (i	f any)	
12		s a child, law firm of parent(s) (i	f any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	An	nount of Contribution (\$)	
	06/30/2021 Merchant, Shelly Contributor address; City; State; Zip Code Deer Park, TX 77536					\$2,500.00	
	0	l		Contaile de de Tale Tide			
		Principal Occupation		Contributor's Job Title			
	Attorney			Attorney and Mediator			
		employer/law firm			ntributor's spouse (if any)		
	Shelly A. Me			James C. Henry, Attorn	ey at L	.aw	
	If contributor is	s a child, law firm of parent(s) (i	tany)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	An	nount of Contribution (\$)	
	06/30/2021	Merchant, Shelly	_				\$1,000.00
		Contributor address; City; Pasadena, TX 77505	State; Zip Code				
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Attorney			Attorney and Mediator			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (i	f any)	
	Shelly A. Me	erchant		James C. Henry, Attorn	ey at L	.aw	
	If contributor is	s a child, law firm of parent(s) (i	f any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 13/20 Rpt: 16/40
2	FILER NAME Berg. Janice	L. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081820
4	Date 06/07/2021	5 Full name of contributorMinocha, Gulshan6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$250.00
		Victoria, TX 77901				
8		Principal Occupation		9 Contributor's Job Title		
_	Physician			Doctor		
10		employer/law firm Clinic of Victoria		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 (\$)
	05/18/2021 Minocha, Sanjay Contributor address; City; State; Zip Code			\$500.00		
		Dallas, TX 75206				
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Minocha Lav	employer/law firm		Law firm of contributor's spouse (if any) Sidley Austin LLP		
		s a child, law firm of parent(s) (if	any)	Sidiley Additif EEF		
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	Date Full name of contributor out-of-state PAC (ID#:_06/17/2021 Nathan Sommers Jacobs, PC Contributor address; City; State; Zip Code				\$1,000.00	
		Houston, TX 77056				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Contributor's 6	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)			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A(J)1			
	The Instru	ction Guide explains how to	complete this f	orm.		s Schedule A(J)1 0 Rpt: 17/40	:	
2	FILER NAME Berg, Janice	L. (The Honorable)			3 Filer ID (Ethics Commissio	on Filers)	
4	Date 06/25/2021	 5 Full name of contributor	out-of-state PAC (ID#:_)	7 Amount of	Contribution (\$)	\$2,500.00	
8	Contributor's F	I Principal Occupation		9 Contributor's Job Title	<u> </u>			
	Attorney			Attorney				
10		employer/law firm wman, P.C.		11 Law firm of contributor's sp	ouse (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#:_)	Amount of	Contribution (\$)		
	06/30/2021 Proffitt, Stephanie Contributor address; City; State; Zip Code Houston, TX 77002					\$1,000.00		
			Contributor's Job Title					
	Attorney			Founder				
	Contributor's	employer/law firm		Law firm of contributor's sp	Law firm of contributor's spouse (if any)			
	Proffitt & Ass	sociates						
	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 (\$)		
	Date Full name of contributor out-of-state PAC (ID#:) O6/29/2021 Quinn, Mary Contributor address; City; State; Zip Code Houston, TX 77006				\$250.00			
	Contributor's F	Principal Occupation		Contributor's Job Title	•			
	Attorney			Owner				
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if any)			
	Self-Employ	ed						
	If contributor is	s a child, law firm of parent(s) (if any)						

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 15/20 Rpt: 18/40
2	FILER NAME Berg. Janice	L. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081820
4	Date 06/29/2021	5 Full name of contributor Rawls, Mary6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$250.00
		The Woodlands, TX 773	382			
8		Principal Occupation		9 Contributor's Job Title		
	Operations			Operations		
10	O Contributor's of MunichRe T	employer/law firm		11 Law firm of contributor's sp	oous	e (if any)
12		s a child, law firm of parent(s) (i	f any)			
	- II contributor i	s a crima, law iiiii or parcria(s) (i	i arry)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	06/15/2021 Ricketts, Ivy Contributor address; City; State; Zip Code			\$250.00		
		Houston, TX 77054				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
		n Of Ivy V. Ricketts				
	If contributor is	s a child, law firm of parent(s) (i	f any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	06/09/2021	Romero, David				\$1,000.00
	Contributor address; City; State; Zip Code					
	Contributor's I	Pearland, TX 77581 Principal Occupation		Contributor's Job Title		
	Attorney	meipai Occupation		Shareholder		
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
	The Romero	Law Firm, P.C.		The Romero Law Firm,	P.C	
	If contributor is	s a child, law firm of parent(s) (i	f any)	1		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 16/20 Rpt: 19/40
2	FILER NAME Berg, Janice	L. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081820
4	Date 06/15/2021	5 Full name of contributor Sachnowitz, Lanny 6 Contributor address; City;	out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$150.00
		Sherman Oaks, CA 914	03			
8		Principal Occupation		9 Contributor's Job Title		
	Not Employe			Not Employed		
10	O Contributor's employer/law firm Not Employed			11 Law firm of contributor's sp	oou	se (if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	06/30/2021 St. Yves, Diane Contributor address; City; State; Zip Code			\$100.00		
		Houston, TX 77098				
		Principal Occupation		Contributor's Job Title		
	Attorney			Owner		
		employer/law firm E OF DIANE ST. YVES, PLI	ı C	Law firm of contributor's sp	oou	se (If any)
		s a child, law firm of parent(s) (i				
	ii contributor i.	s a clind, law littl of paretil(s) (i	i aliy)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/17/2021	Strong, Pat				\$5.00
	Contributor address; City; State; Zip Code Houston, TX 77056					
_	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Fundraiser			Owner		
	Contributor's	employer/law firm		Law firm of contributor's sp	oou	se (if any)
	Strong Strate	egies, LLC				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A(J)1			
	The Instru	ction Guide explains how to complete t	his f	orm.	1	Total pages Schedule A(J)1: Sch: 17/20 Rpt: 20/40			
2	FILER NAME Berg, Janice	L. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081820			
4	Date 06/29/2021	5 Full name of contributor out-of-state PAC Tran, Thao 6 Contributor address; City; State; Zip Code Houston, TX 77002	; (ID#:_)	7	Amount of Contribution (\$) \$1,000.00			
_	Caratuilar staula I	Contributor's Principal Occupation 9 Contributor's Job Title							
8		Principal Occupation							
40	Attorney	and a south as fewer		Attorney		of the same			
10	The Law Offices of Thao T Tran, PC		11 Law firm of contributor's sp	ous	se (if any)				
12	If contributor i	s a child, law firm of parent(s) (if any)							
	Date	Full name of contributor	: (ID#:)	Π	Amount of Contribution (\$)			
	06/29/2021 Valdez, Stacey Contributor address; City; State; Zip Code Webster, TX 77598				\$500.00				
	0			Occasionate de Tale					
		Principal Occupation		Contributor's Job Title Attorney					
	Attorney				utor's snouse (if any)				
	Self	employer/law firm		Law firm of contributor's sp	ous	se (ii ariy)			
	If contributor i	s a child, law firm of parent(s) (if any)							
	Date	Full name of contributor	: (ID#:_)		Amount of Contribution (\$)			
	06/30/2021	Valentine, Sara				\$500.00			
	Contributor address; City; State; Zip Code Houston, TX 77024								
	Contributor's I	Principal Occupation		Contributor's Job Title					
	Attorney			Partner					
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)			
	Schlanger S	ilver LLP		Munsch, Hardt, Kopf, ar	nd I	Harr, P.C.			
	If contributor i	s a child, law firm of parent(s) (if any)		•					

	MONET	ARY POLITICAL	SCHEDULE A(J)1			
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 18/20 Rpt: 21/40
2	FILER NAME Berg. Janice	L. (The Honorable)			1	Filer ID (Ethics Commission Filers)
4	Date 06/16/2021	5 Full name of contributorVan Ness, John6 Contributor address; City;	out-of-state PAC (ID#:		╀	Amount of Contribution (\$) \$2,500.00
		Houston, TX 77008				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Partner		
10				11 Law firm of contributor's sp		
_	Lilly & Van Ness Jeannie McDowell Attor If contributor is a child, law firm of parent(s) (if any)			rney a	at Law 	
12	IT CONTRIBUTOR IS	s a child, law firm of parent(s) (I	r any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/25/2021 Walters, Brian Contributor address; City; State; Zip Code			\$500.00		
	Ocatrila de de la	Houston, TX 77002		Occidented to Till		
		Principal Occupation		Contributor's Job Title Partner		
_	Attorney	employer/law firm		Law firm of contributor's sp	201100	(if any)
	Walters Gilb			Law IIIII of Contributor's Sp	Jouse	(II ally)
		s a child, law firm of parent(s) (i	f anv)			
		(-)(-)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	P	Amount of Contribution (\$)
	06/01/2021	Yates, Trey				\$2,500.00
		Contributor address; City;	State; Zip Code			
		Houston, TX 77027				
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oouse	(if any)
	Law Office o		5 a.a. A			
	ii contributor ii	s a child, law firm of parent(s) (i	rany)			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A(J)1		
	The Instru	ction Guide explains how to comple	te this f	orm.	1	Total pages Schedule A(J)1: Sch: 19/20 Rpt: 22/40	
2	FILER NAME Berg, Janice	L. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081820	
4	Date 06/30/2021	 Full name of contributor	PAC (ID#:_)	7	Amount of Contribution (\$) \$500.00	
	Houston, TX 77036 Contributor's Principal Occupation 9 Contributor's Job Title						
8		Principal Occupation					
40	Attorney	and a second and the second		Attorney		Ct - m)	
10	The Law office of Bobbie Young, RN, JD		11 Law firm of contributor's sp	ous	е (іт апу)		
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 (\$)	
	06/30/2021 Zack, Carolyn Contributor address; City; State; Zip Code Philadelphia, PA 19103				\$100.00		
	0	<u> </u>		Occasionated to Title			
		Principal Occupation		Contributor's Job Title Attorney			
	Attorney	and a conflow firm		Law firm of contributor's spouse (if any)			
	Momjian And	employer/law firm		Post and Post, LLC			
		s a child, law firm of parent(s) (if any)		FOST AND FOST, LLC			
	Date	Full name of contributor out-of-state	PAC (ID#:_)		Amount of Contribution (\$)	
	Date Full name of contributor out-of-state PAC (ID#:				\$300.00		
	Contributor's F	Principal Occupation		Contributor's Job Title			
	Attorney			Partner			
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	e (if any)	
	Spencer Far	ne Llp					
	If contributor is	s a child, law firm of parent(s) (if any)					

ARY POLITICAL CONTRIBUTION	SCHEDULE A(J)1	
ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 20/20 Rpt: 23/40
		3 Filer ID (Ethics Commission Filers)
L. (The Honorable)		00081820
5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
Zimmerman, Gary		\$200.00
6 Contributor address; City; State; Zip Code Bellaire TX 77401		
	Contributor's 1oh Title	
-inicipal Occupation		
-		nouse (if any)
	Law littl of contributors sp	louse (ii aiiy)
	L. (The Honorable) 5 Full name of contributor out-of-state PAC (ID#:_Zimmerman, Gary 6 Contributor address; City; State; Zip Code Bellaire, TX 77401 Principal Occupation	5 Full name of contributor out-of-state PAC (ID#:) Zimmerman, Gary 6 Contributor address; City; State; Zip Code Bellaire, TX 77401 Principal Occupation 9 Contributor's Job Title Of Counsel employer/law firm 11 Law firm of contributor's space LLP

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
L		The Instruction Guide explains how to complete this form.	
1	1 0		
	Sch: 1/15 Rpt: 24/40	Berg, Janice L. (The Honorable) 00081820	
4	Date	5 Payee name	
	01/19/2021	Acuity Scheduling	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$26.55	PO Box 4668 #64465	
		New York, NY 10163-4668	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
		Check if Austin, TX, officeholder living expense	
		Scheduling service	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
	CAPERICITIES TO DETICAL C/OF		
	Date	Payee name	
	02/19/2021	Acuity Scheduling	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$26.65	PO Box 4668 #64465	
		New York, NY 10163-4668	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Scheduling service	
		Jonedaling Service	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	\dashv
	expenditure to benefit C/O		
_	Date	Payon namo	_
	03/19/2021	Payee name Acuity Scheduling	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$26.65	PO Box 4668 #64465	
		New York, NY 10163-4668	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Scheduling service	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
_			_

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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: 2/15 Rpt: 25/40	Berg, Janice L. (The Honorable) 00081820
4	Date	5 Payee name
	04/19/2021	Acuity Scheduling
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$26.65	PO Box 4668 #64465
		New York, NY 10163-4668
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Scheduling service
		Scheduling Service
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
	Date	Pouso namo
	05/19/2021	Payee name Acuity Scheduling
	Amount (\$)	Payee address; City; State; Zip Code
	\$26.65	PO Box 4668 #64465
		New York, NY 10163-4668
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Scheduling service
		Concading Service
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	06/21/2021	Acuity Scheduling
	Amount (\$)	Payee address; City; State; Zip Code
	\$26.65	PO Box 4668 #64465
	Ψ20.00	1 0 200 4000 1104400
		New York, NY 10163-4668
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Scheduling service
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 (enter a category not listed above)

	Consulting 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: 3/15 Rpt: 26/40	Berg, Janice L. (The Honorable) 00081820
4	Date	5 Payee name
	06/22/2021	Amegy Bank of Texas
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$21.70	P.O. Box 27459
		Houston, TX 77227-7459
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Banking fee
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/12/2021	Area 5 Democrats
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	3800 Spencer Highway Suite L
		3 · · · · · · · · · · · · · · · · · · ·
		Pasadena, TX 77504
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	2/11 2/13/17 C/12	Candidate/Officeholder/Political Committee
		Donation
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/04/2021	Family Court's Benevolent Fund
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	201 Caroline
		Floor 17
		Houston, TX 77002
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expens Legal Services			or	Travel in District Travel Out of D OTHER (enter		
			The Instruction Guide ex	xplains how to com	plete this form	١.			
1	Total pages Schedule F1:					3	Filer ID	(Ethics Commission File	rs)
	Sch: 4/15 Rpt: 27/40	Berg, Janio	ce L. (The Honorable))			00081820		
4	Date	5 Payee name	e						
	06/14/2021	GoDaddy							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Cod	е				
	\$191.70	7145 E. 1s	t St.						
		Scottsdale	, TX 85251						
8	PURPOSE OF	(a) Category (s	See Categories listed at the top of	of this schedule)	b) Description				
	EXPENDITURE	Office Ove	rhead/Rental Expense	e			de of Texas. Cor officeholder livir	mplete Schedule T.	
							ite domain	ig experise	
9	Complete ONLY if direct	Candidate/Of	ficeholder name	Office soug	ht		Office h	neld	
_	expenditure to benefit C/O		noonoladi name				0111001		
	Date	Payee name	e						
	01/04/2021	Google Inc							
	Amount (\$)	Payee addre	ess; City;	State; Zip Cod	е				
	\$6.40	1600 Ampl	nitheatre Pkwy						
		Mountain \	/iew, CA 94043						
	PURPOSE	(a) Category (S	See Categories listed at the top of	of this schedule)	b) Description	n			
	OF EXPENDITURE		rhead/Rental Expense					mplete Schedule T.	
					ш		officeholder livir	ng expense	
					Google S	buile Su	bscription		
	Complete ONLY if direct	Condidate/Of	ficeholder name	Office source	h+		Office h	and	
	expenditure to benefit C/O		iicenoidei name	Office soug	IIL		Office i	ieiu	
	Date	Payee name							
	02/03/2021	Google Inc							
	Amount (\$)	Payee addre	•	State; Zip Cod	е				
	\$6.40	1600 Ampl	nitheatre Pkwy						
		Mountain \	/iew, CA 94043						
	PURPOSE	(a) Category (S	See Categories listed at the top of	of this schedule)	b) Description	n			
	OF EXPENDITURE	Office Ove	rhead/Rental Expense	е				mplete Schedule T.	
							officeholder livir	ng expense	
					Google 3	unc 50	มอดาเหนิบเา		
	Complete ONLY if direct	Candidate/Of	ficeholder name	Office soug	ht		Office h	oold	
	expenditure to benefit C/O		ncenoluel Hame	Onice soug	III		Office f	iciu	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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: 5/15 Rpt: 28/40	Berg, Janice L. (The Honorable) 00081820
4	Date	5 Payee name
	03/02/2021	Google Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$6.40	1600 Amphitheatre Pkwy
		Mountain View, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Google Suite subscription
		Google Suite Subscription
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	5 .	
	Date	Payee name
	04/05/2021	Google Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$6.40	1600 Amphitheatre Pkwy
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Google Suite subscription
		Google Suite subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Data	
	Date 05/04/2021	Payee name
		Google Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$6.40	1600 Amphitheatre Pkwy
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Google Suite subscription
		Google Suite subscription
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm 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	
	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: 6/15 Rpt: 29/40	Berg, Janice L. (The Honorable) 00081820
4	Date	5 Payee name
	06/03/2021	Google Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$6.40	1600 Amphitheatre Pkwy
		Mountain View, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Google Suite subscription
_	2	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/17/2021	Greater Heights Area Democrats
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.00	5640 Kiam St
		Houston, TX 77004
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Membership dues
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit Gree	
	Date	Payee name
	01/20/2021	Harris County Democratic Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	4619 Lyons Avenue
		Houston, TX 77020
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXI ENDITORE	Candidate/Officeholder/Political Committee
		Monthly donation
	Complete ONLY if dies -t	Condidate/Officeholder name Office country
	Complete ONLY if direct expenditure to benefit C/OI	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 Commit Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
Ļ		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 7/15 Rpt: 30/40	Berg, Janice L. (The Honorable) 00081820
4	Date	5 Payee name
	02/22/2021	Harris County Democratic Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.00	4619 Lyons Avenue
		Houston, TX 77020
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	LXI ENDITORE	Candidate/Officeholder/Political Committee
		Monthly donation
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
L	experiorure to beriefit C/Of	
	Date	Payee name
L	03/18/2021	Harris County Democratic Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	4619 Lyons Avenue
		Houston, TX 77020
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Donation
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experientare to benefit C/OI	'
	Date	Payee name
L	03/22/2021	Harris County Democratic Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	4619 Lyons Avenue
		Houston, TX 77020
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	LAFLINDITURE	Candidate/Officeholder/Political Committee
		Monthly donation
	0 1. 0	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Superiord to belieff 0/01	·

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	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: 8/15 Rpt: 31/40	Berg, Janice L. (The Honorable) 00081820
4	Date	5 Payee name
	04/20/2021	Harris County Democratic Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.00	4619 Lyons Avenue
		Houston, TV 77020
_	DUDDOGE	Houston, TX 77020
8	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
		Monthly donation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	05/20/2021	Harris County Democratic Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	4619 Lyons Avenue
		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
		Monthly donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/21/2021	Harris County Democratic Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	4619 Lyons Avenue
		Houston, TX 77020
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Monthly donation
	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 -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
-	Total pages Cabadula F1:	2 Files ID (Ethics Commission Files)
1	Total pages Schedule F1: Sch: 9/15 Rpt: 32/40	2 FILER NAME Berg, Janice L. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00081820
4	Date	5 Payee name
	06/24/2021	Harris County Democratic Party
6	Amount (\$) \$20.22	7 Payee address; City; State; Zip Code 4619 Lyons Avenue
_	DUDDOGE	Houston, TX 77020
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/19/2021	Houston Bar Association
	Amount (\$)	Payee address; City; State; Zip Code
	\$98.80	1111 Bagby St.
		#200
		Houston, TX 77002
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		CLE registration
		CLE registration
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/04/2021	Krisp
	Amount (\$)	Payee address; City; State; Zip Code
	\$60.00	9486 Long Point Rd
		Houston, TX 77055
	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
		Staff lunch
	Complete ONLY if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Ever Accounting/Banking Fee Consulting Expense Foot Contributions/ Donations Made By - Giff Candidate/Officeholder/Political Committee Leg

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Wangs/Contract Labor

	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: 10/15 Rpt: 33/40	Berg, Janice L. (The Honorable) 00081820
4	Date	5 Payee name
	06/10/2021	La Calle Tacos
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$93.43	909 Franklin
		Houston, TX 77002
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 Staff lunch
		Star fundi
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Davida marra
		Payee name Mayorland Area Democrate
	03/16/2021	Meyerland Area Democrats
	Amount (\$)	Payee address; City; State; Zip Code
	\$36.00	P.O. Box 310061
		Houston, TX 77035
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	-	Candidate/Officeholder/Political Committee
		Donation
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
	Data	
	Date	Payee name
	06/23/2021	Monarch Printing
	Amount (\$)	Payee address; City; State; Zip Code
	\$218.66	6605 McGrew St # B
		Houston, TX 77087
	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 Printing updated campaign letterhead and envelopes
		Finding updated campaign letternead and envelopes
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Gift/Awards/Mer

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica 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: 11/15 Rpt: 34/40	Berg, Janice L. (The Honorable) 00081820
4	Date	5 Payee name
	06/04/2021	Ninfa's Original
6	Amount (\$) \$89.28	7 Payee address; City; State; Zip Code 2704 Navigation Blvd
		Houston, TX 77003
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff lunch
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	04/12/2021	Parcel Plus 131
	Amount (\$)	Payee address; City; State; Zip Code
	\$185.00	5161 San Felipe St #320
		Houston, TX 77056
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign mailbox
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/17/2021	RallyPay
	Amount (\$)	Payee address; City; State; Zip Code
	\$347.40	995 Market Street, 2nd Floor
		San Francisco, CA 94105
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit card processing fees
		Cook sala processing root
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

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: 12/15 Rpt: 35/40	Berg, Janice L. (The Honorable) 00081820
4	Date	5 Payee name
	06/01/2021	RallyPay
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,517.40	995 Market Street, 2nd Floor
		San Francisco, CA 94105
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit card processing fees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	05/14/2021	Southwest Democrats
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	P.O. Box 2053
		Bellaire, TX 77402-2053
	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
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	06/01/2021	Strong Strategies LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	325 W 18th St
		Houston, TX 77008
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Fundraising & compliance services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting 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: 13/15 Rpt: 36/40	Berg, Janice L. (The Honorable) 00081820
4	Date	5 Payee name
	01/26/2021	Texas Center for the Judiciary
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	1210 San Antonio
		Suite 800
		Austin, TX 78701
8	PURPOSE	
o	OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Donation
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/04/2021	The Beacon Agency
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	945 McKinney St.
		Ste 12230
		Houston, TX 77002
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign website design
	2 2	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/02/2021	The Beacon Agency
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	945 McKinney St.
		Ste 12230
		Houston, TX 77002
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign website design
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·

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 co	mple	ete this form.				
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)				
	Sch: 14/15 Rpt: 37/40	Berg, Janice L. (The Honorable)	00081820					
4	Date	5 Payee name		•				
	03/02/2021	The Beacon Agency						
6	Amount (\$)	7 Payee address; City; State; Zip Co	de					
	\$35.00	945 McKinney St.						
		Ste 12230						
		Houston, TX 77002						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description				
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.				
				Check if Austin, TX, officeholder living expense Campaign website design				
				campaign wester design				
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held				
	expenditure to benefit C/OI	1						
	Date	Payee name						
	04/02/2021	The Beacon Agency						
	Amount (\$)	Payee address; City; State; Zip Co	de					
	\$35.00	945 McKinney St.						
		Ste 12230						
		Houston, TX 77002						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description				
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.				
				Check if Austin, TX, officeholder living expense Campaign website design				
				Campaign weself doorgi				
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held				
	expenditure to benefit C/OI	1						
	Date	Payee name						
	05/03/2021	The Beacon Agency						
	Amount (\$)	Payee address; City; State; Zip Co	de					
	\$35.00	945 McKinney St.						
		Ste 12230						
		Houston, TX 77002						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description				
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.				
				Check if Austin, TX, officeholder living expense Campaign website design				
				Campaign woodic doorgin				
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held				
	expenditure to benefit C/OI	4						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Commit Credit Card Payment			mmittee	Food/Beverage Exp Gift/Awards/Memori Legal Services The Instruction	als Expense		nse es/Contract Labo		Travel in District Travel Out of Dis OTHER (enter a	
1	Total pages Schedule F1:	2	FII FR NAM					3	Filer ID	(Ethics Commission Filers)
-	Sch: 15/15 Rpt: 38/40	-		ce L. (The Hor	norable)			ľ	00081820	(2000)
Ļ		_							00001020	
4	Date	5	Payee name							
	06/02/2021		The Beaco	n Agency						
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Code				
	\$35.00		945 McKin	ney St.						
			Ste 12230							
			Houston, T	X 77002						
Ļ		<u> </u>				1				
8	PURPOSE OF	(a)		See Categories listed		nedule) (t) Descriptio			
	EXPENDITURE		Office Ove	rhead/Rental E	xpense				de of Texas. Com , officeholder living	
									ite design	у схропос
							Campaig		nto doolgii	
_	Complete ONLY if direct	<u> </u>	Candidata/Off	ficebolder name		Office sough	+		Office he	ald.
9	Complete ONLY if direct expenditure to benefit C/O		Januluale/On	ficeholder name	(Office sough	ι		Office he	au

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Fees Office Overnead/Rental Expense Food/Beverage Expense Office Overnead/Rental Expense Polling Expense Frinting Expense Printing Expense Salaries/Wages/Contract Labor			Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
	·		The Instruction Guide explains	now to co	mplete this form.					
1	1 0	2 FILER NAME				1	•	s Commission Filers)		
L	Sch: 1/2 Rpt: 39/40	Berg, Janice	L. (The Honorable)			0	0081820			
4	Date	5 Payee name								
L	01/21/2021	Zoom Video	Communications, Inc.							
6	Amount (\$)	7 Payee address	s; City; State;	Zip Co	de					
	\$31.96	55 Almaden I	Blvd							
	Reimbursement from political contributions	6th Floor	6th Floor							
	intended	San Jose, CA 95113								
8 PURPOSE		(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule								
	OF EXPENDITURE	Office Overhe	ead/Rental Expense				Check if Austin, TX, officeholder living expense			
				Virtual meeting s	software					
_	0 1. 0	0 111 : 15								
9	Complete ONLY if direct expenditure to benefit	Candidate/Officeho	older name		Office sought		Office	eneld		
L	C/OH									
	Date	Payee name								
	02/21/2021	•	Communications, Inc.							
	Amount (\$)	Payee address; City; State; Zip Code								
	\$31.96	55 Almaden I	Blvd							
	Reimbursement from	6th Floor								
	X political contributions intended	San Jose, CA 95113								
	PURPOSE	Category (See	Categories listed at the top of this scho	edule)	Description [Chec	ck if travel outside of	Texas. Complete Schedule T.		
OF EXPENDITURE		Office Overhe	ead/Rental Expense			_		cholder living expense		
					Virtual meeting software					
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Complete <u>ONLY</u> if direct expenditure to benefit		Candidate/Officeholder name Office sought Office held						held		
L	C/OH									
	Date	Payee name								
	03/21/2021	•	Communications, Inc.							
	Amount (\$)	Payee address	s; City; State;	Zip Co	de					
	\$31.96	55 Almaden I	Blvd							
Reimbursement from political contributions intended		6th Floor								
		San Jose, CA 95113								
	PURPOSE	Category (See	Categories listed at the top of this scho	edule)	Description	Chec	ck if travel outside of	Texas. Complete Schedule T.		
OF EXPENDITURE		Office Overhead/Rental Expense						cholder living expense		
					Virtual meeting s	oftwa	are			
	Complete ONLY if direct expenditure to benefit	Candidate/Officeho	older name		Office sought		Office	e held		
	C/OH									

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain		Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)				
1	1 Total pages Schedule G: 2 FILER NAM		 F		3 Filer ID (Ethics Commission Filers)					
			e L. (The Honorable)							
4	Date	5 Payee name	1							
	04/21/2021	'','' ''	o Communications, Inc.							
6	Amount (\$)	7 Payee addre	ess; City; Stat	te; Zip Co	ode					
	\$31.96	55 Almade	n Blvd							
	Reimbursement from	6th Floor	6th Floor							
	X political contributions intended	San Jose, CA 95113								
8	DUDDOCE				(h) Description [Check if travel outside of Texas. Complete Schedule T.				
ľ	PURPOSE OF	1	See Categories listed at the top of this s	scnedule)	(b) Description	Check if Austin, TX, officeholder living expense				
	EXPENDITURE	Office Over	rhead/Rental Expense		Virtual mooting	eting software				
					Virtual meeting :					
Ļ	Complete ONLY if direct	Candidata/Office	haldername		Office cought	Office hold				
9	Complete <u>ONLY</u> if direct expenditure to benefit	Candidate/Office	enoluer name		Office sought	Office held				
	C/OH									
	Date	Payee name)							
	05/21/2021	Zoom Vide	o Communications, Inc.							
	Amount (\$)	Payee addre	ess; City; Stat	te; Zip Co	ode					
	\$31.96	55 Almaden Blvd								
	Reimbursement from	6th Floor								
	X political contributions intended	San Jose, CA 95113								
_	PURPOSE	_	See Categories listed at the top of this s	chodulo)	Description	Check if travel outside of Texas. Complete Schedule T.				
OF		1	rhead/Rental Expense	ocricuale)	Description	Check if Austin, TX, officeholder living expense				
EXPENDITURE		Office Over	Virtual meeting software							
	Complete ONLY if direct	Candidate/Office	holder name		Office sought	Office held				
expenditure to benefit C/OH										
	C/OI1									
	Date	Payee name								
	06/21/2021	Zoom Vide	o Communications, Inc.							
	Amount (\$)	Payee addre	ess; City; Stat	te; Zip Co	ode					
	\$31.96	55 Almade	n Blvd							
	Reimbursement from	6th Floor								
x political contributions intended		San Jose, CA 95113								
\vdash	PURPOSE	Category (s	See Categories listed at the top of this s	schedule)	Description	Check if travel outside of Texas. Complete Schedule T.				
	OF	Office Ove	rhead/Rental Expense			Check if Austin, TX, officeholder living expense				
	EXPENDITURE		·		Virtual meeting	software				
	Complete ONLY if direct	Candidate/Office	holder name		Office sought	Office held				
	expenditure to benefit C/OH									
L	G, G11									