FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00081777 13 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Tristan H. NAME Date Received **ELECTRONICALLY FILED** 07/15/2021 NICKNAME LAST **SUFFIX** Longino CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** PO Box 19186 MAILING Receipt # Amount **ADDRESS** Change of Address Houston, TX 77224 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Elisabeth W. NAME NICKNAME LAST **SUFFIX** Netherton **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER** PO Box 19186 **ADDRESS** (Residence or Business) Houston, TX 77224 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (832) 390-1878 **PHONE** REPORT TYPE January 15 30th day before election 15th day after campaign treasurer Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Day Month Day Year Year **COVERED THROUGH** 01/01/2021 06/30/2021 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/01/2022 General Special

11 OFFICE

OFFICE HELD (if any)

Family District Court Judge District 245 Harris

12 OFFICE SOUGHT (if known)

Family District Court Judge District 245

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 13

13 C / OH NAME	Longino, Tristan H.	The Honorable)	14 Filer ID (00081777	(Ethics Commission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expend These expenditures may have been made witho d officeholders are required to report this informa	ut the candidate's or office	eholder's knowledge or			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
	GENERAL						
		COMMITTEE ADDRESS					
COMMITTEE CAMPAIGN TREASURER NAME							
		COMMITTEE CAMPAIGN TREASURER ADDR	ESS				
16 CONTIBUTION	1. TOTAL UNITEM	IZED POLITICAL CONTRIBUTIONS(OTHER TH	AN PLEDGES LOANS				
TOTALS		ES OF LOANS, OR CONTRIBUTIONS MADE E		\$ 0.00			
		TICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOA	NS)	\$ 900.00			
EXPENDITURE TOTALS							
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 2,608.27			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	CAL CONTRIBUTIONS MAINTAINED AS OF THE ERIOD	LAST DAY OF THE	\$ 6,085.26			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS A RTING PERIOD	AS OF THE LAST DAY	\$ 0.00			
17 AFFADAVIT							
		I swear, or affirm, under pen true and correct and includes under Title 15, Election Code	all information required t	companying report is o be reported by me			
		The Hon	orable Tristan H. Long	jino			
		Signature	of Candidate or Officehol	lder			
AFFIX NO	ΓARY STAMP / SEAL AB	OVE					
Sworn to and subso	cribed before me, by the s	aid	, this the	day			
		ertify which, witness my hand and seal of office.					
Signature of offic	er administering oath	Printed name of officer administering oath	Title of officer	r administering oath			

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			3 of 13						
18 FILER NA		19 Filer ID	(Ethics Commission Filers)						
	Longino, Tristan H. (The Honorable) 00081777								
	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT						
IVAIVIE OI	TWINE OF SOFTEBOLE								
1. X	1. X SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)								
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS								
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$						
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$						
5. X	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS								
6.	6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS								
7.	7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS								
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$						
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 1,463.17						
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	\$							
11.	11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS								
12. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$ 0.29						
			•						

	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: 1/2 Rpt: 4/13
2	FILER NAME	stan H. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00081777
4					7	Amount of Contribution (\$) \$250.00
		Houston, TX 77098				
8		Principal Occupation				
_	Lawyer			Attorney		
10		employer/law firm er Johnson & Raval, LLP		11 Law firm of contributor's sp	oous	se (If any)
12		s a child, law firm of parent(s) (i	f any)	<u> </u>		
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Т	Amount of Contribution (\$)
	06/28/2021	Gell, Christianne Contributor address; City;	<u> </u>			\$50.00
		Houston, TX 77008				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Sales			Sales		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	06/30/2021	St Yves, Diane				\$100.00
		Contributor address; City; Houston, TX 77098	State; Zip Code		1	
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	LAW OFFIC	E OF DIANE ST. YVES, PLI	LC			
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this f	l	ges Schedule A(J)1: 2 Rpt: 5/13	
2	FILER NAME			3 Filer ID	(Ethics Commission Filers)
	Longino, Tris	stan H. (The Honorable)		000817	77
4	Date 5 Full name of contributor out-of-state PAC (ID#:)				of Contribution (\$)
	06/28/2021	Valdez, Stacey			\$500.00
		6 Contributor address; City; State; Zip Code			
		Houston, TX 77598	-		
8		Principal Occupation	9 Contributor's Job Title		
	Attorney		Attorney		
10		employer/law firm	11 Law firm of contributor's sp	ouse (if any)	
		ez & Associates			
12	If contributor i	s a child, law firm of parent(s) (if any)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTUPE (expenses)

	Credit Card Payment	Committee	The Ins		explains how to co		ete this form.		OTHER (enter	a category not listed above)	
1	Total pages Schedule F1:	2 FILER	NAME					3	Filer ID	(Ethics Commission Filers)	_
	Sch: 1/1 Rpt: 6/13	Longino, Tristan H. (The Honorable)						1	00081777		
4	Date	Payee	name								
	02/04/2021	Family	y Courts Ben	evolent Fund	t						
6	Amount (\$)	7 Payee	address;	City;	State; Zip Co	ode					
	\$100.00	201 C	aroline St.								
		17th F	loor								
		Houst	on, TX 7700	2							
8	PURPOSE	a) Catego	ory (See Categor	ries listed at the top	o of this schedule)	(b)	Description				
	OF EXPENDITURE			rials Expens			ш			mplete Schedule T.	
	-						benevolent fu		officeholder livir	ng expense	
							benevolent te	unu			
9	Complete ONLY if direct	Candida	ate/Officeholde	r name	Office sou	l ıaht			Office h	neld	
	expenditure to benefit C/OI					3					
	Date	Payee	name								_
	03/17/2021	Harris	County Den	nocratic Party	y						
	Amount (\$)	Payee	address;	City;	State; Zip Co	ode					_
	\$1,000.00	4619	Lyons Avenu	ie							
		Houst	on, TX 7702	0							
	PURPOSE OF	a) Catego	ory (See Categor	ries listed at the top	o of this schedule)	(b)	Description				
	EXPENDITURE	Event	Expense						de of Texas. Cor officeholder livir	nplete Schedule T.	
							JRR	1, 17,	onicendaei iivii	ig expense	
	Complete ONLY if direct	Candida	ate/Officeholde	r name	Office sou	ıght			Office h	neld	
	expenditure to benefit C/OI										

SCHEDULE G

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		'- G	Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Polling Expense Printing Expense Salaries/Wages/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)			
	Credit Card Payment	٦	The Instruction Guide explains	how to co	mplete this form.			
1	Total pages Schedule G:	2 FILER NAME				3 F	iler ID	(Ethics Commission Filers)
	Sch: 1/6 Rpt: 7/13	Longino, Tris	tan H. (The Honorable)			0	008177	77
4	Date	5 Payee name						
	01/25/2021	Acuity Sched	luling					
6	Amount (\$)	7 Payee address	s; City; State;	Zip Co	de			
	\$293.14	PO Box 4668	3 #64465					
	Reimbursement from							
	X political contributions intended	New York, N	Y 10163-4668					
8	PURPOSE OF	(a) Category (See	Categories listed at the top of this scho	edule)	(b) Description	=		outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overh	ead/Rental Expense		L	_		TX, officeholder living expense
					online scheduling	g for (court	
9	Complete ONLY if direct expenditure to benefit	Candidate/Officeho	older name		Office sought			Office held
	C/OH							
	Date	Payee name						
	05/21/2021	Amazon.com	ı, Inc.					
	Amount (\$)	Payee address	s; City; State;	Zip Co	de			
	\$75.00	1200 12th Av		_,				
	Reimbursement from	Suite 1200						
	X political contributions intended		00144					
		Seattle, WA						
	PURPOSE OF		Categories listed at the top of this sch	edule)	Description	=		outside of Texas. Complete Schedule T. TX, officeholder living expense
	EXPENDITURE	GIT/Awards/i	Memorials Expense		staff gift		,	,
					stan giit			
	Complete ONLY if direct	L Candidate/Officeho	older name		Office sought			Office held
	expenditure to benefit				amer cong			
	C/OH							
	Date	Payee name						
	03/11/2021	Area 5 Demo	ocrats					
	Amount (\$)	Payee address	s; City; State;	Zip Co	de			
	\$250.00	3800 Spence	er Highway					
	Reimbursement from	Suite L						
	X political contributions intended	Pasadena, T	X 77504					
	PURPOSE	Category (See	Categories listed at the top of this sch	edule)	Description	_		outside of Texas. Complete Schedule T.
	OF EXPENDITURE		s/Donations Made By			Ched	ck if Austin,	TX, officeholder living expense
		Candidate/Of	fficeholder/Political Comm	ittee	membership			
	Complete ONLY if direct expenditure to benefit	Candidate/Officeho	older name		Office sought			Office held
	C/OH							
\vdash								

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 2/6 Rpt: 8/13 Longino, Tristan H. (The Honorable) 00081777 Date Payee name 06/22/2021 Harris County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$20.22 4619 Lyons Avenue Reimbursement from political contributions Х intended Houston, TX 77020 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense **Event Expense EXPENDITURE** ticket for event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/06/2021 Houston Bar Association Amount (\$) Payee address; City; State; Zip Code \$98.80 1111 Bagby St. **FLB 200** Reimbursement from political contributions Χ Houston, TX 77002 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense CLE **EXPENDITURE** Implicit bias training for judges Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 06/22/2021 Houston GLBT Political Caucus PAC Payee address: City; State; Zip Code Amount (\$) \$40.00 PO Box 66664 Reimbursement from Χ political contributions intended

PURPOSE

OF

EXPENDITURE

Complete ONLY if direct

expenditure to benefit

C/OH

Houston, TX 77266-6664

Candidate/Officeholder name

Category (See Categories listed at the top of this schedule)

Candidate/Officeholder/Political Committee

Contributions/Donations Made By

Description

membership dues

Office sought

Check if travel outside of Texas. Complete Schedule T.

Check if Austin, TX, officeholder living expense

Office held

SCHEDULE G

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

Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Credit Card Payment The Instruction Guide explains how to complete this form.

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

1	Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 3/6 Rpt: 9/13	Longino, Tristan H. (The Honorable)	00081777							
4	Date	5 Payee name								
	06/05/2021	Krisp Technologies, Inc								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$120.00	2150 Shattuck Ave, Suite 1300								
	Reimbursement from political contributions									
	x political contributions intended	Berkeley, CA 94704								
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							
		au	ıdio filtering software for Zoom hearings							
L										
9	Complete <u>ONLY</u> if direct expenditure to benefit	Candidate/Officeholder name	Office sought Office held							
	C/OH									
Г	Date	Payee name								
	06/22/2021	Meyerland Area Democrats Club								
Г	Amount (\$)	Payee address; City; State; Zip Code								
	\$21.00	PO Box 310061								
	Reimbursement from political contributions									
	x political contributions intended	Houston, TX 77035								
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description							
	OF EXPENDITURE	Contributions/Donations Made By	Check if Austin, TX, officeholder living expense							
		Candidate/Officeholder/Political Committee m	embership							
L	Oncordate ONUV if allocat	Constitute (Office lead and one	Office accepts							
	expenditure to benefit	Candidate/Officeholder name	Office sought Office held							
	C/OH									
Г	Date	Payee name								
	05/10/2021	Namecheap.com								
Γ	Amount (\$)	Payee address; City; State; Zip Code								
	\$26.32	4600 East Washington Street								
	Reimbursement from	Suite 305								
ĺ	X political contributions intended	Phoenix, AZ 85034								

PURPOSE

OF

EXPENDITURE

Complete ONLY if direct

expenditure to benefit

C/OH

Category (See Categories listed at the top of this schedule)

Advertising Expense

Candidate/Officeholder name

Description

Office sought

website

Check if travel outside of Texas. Complete Schedule T.

Check if Austin, TX, officeholder living expense

Office held

SCHEDULE G

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

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Валкіпд Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E Salaries/N	xpense Nages/Contract Labor		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	oreal out a taymon		The Instruction Guide explains	how to co	omplete this form.		
1	Total pages Schedule G:	2 FILER NAM				3	Filer ID (Ethics Commission Filers)
	Sch: 4/6 Rpt: 10/13	Longino, T	ristan H. (The Honorable)				00081777
4	Date	5 Payee name	!				
	06/25/2021	Namechea	p.com				
6	Amount (\$)	7 Payee addre	ess; City; State	; Zip Co	ode		
	\$12.86	4600 East	Washington Street				
	Reimbursement from political contributions	Suite 305					
	intended	Phoenix, A	Z 85034				
8	PURPOSE OF	(a) Category (s	see Categories listed at the top of this sch	nedule)	(b) Description	=	neck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Ove	head/Rental Expense		<u>L</u>	Ch	neck if Austin, TX, officeholder living expense
					campaign email		
Ļ	Compulate ONLY if diseast	Canalidate/Office	haldar nama		Office severals		Office held
9	Complete <u>ONLY</u> if direct expenditure to benefit	Candidate/Office	noider name		Office sought		Office held
	C/OH						
	Date	Payee name					
	01/15/2021	SmileOnMy	/Mac, LLC dba Smile				
	Amount (\$)	Payee addre	ess; City; State	; Zip Co	ode		
	\$34.55	350 Bay St	reet				
	Reimbursement from	Suite 100,	PMB 278				
	X political contributions intended	San Franci	sco, CA 94133				
	PURPOSE	Category (s	see Categories listed at the top of this sch	nedule)	Description	Ch	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Office Ove	head/Rental Expense				neck if Austin, TX, officeholder living expense
					text expansion so	oftw	/are
	Operation ONLY if allower	0	h-1d		O#:		Office held
	Complete ONLY if direct expenditure to benefit	Candidate/Office	nolder name		Office sought		Office held
	C/OH						
	Date	Payee name					
	06/22/2021	Southwest	Democrats				
	Amount (\$)	Payee addre	ess; City; State	; Zip Co	ode		
	\$20.00	PO Box 20	53				
	Reimbursement from political contributions						
	X political contributions intended	Bellaire, T	77402				
	PURPOSE	Category (s	see Categories listed at the top of this sch	nedule)	Description	Ch	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		ns/Donations Made By	•		_	neck if Austin, TX, officeholder living expense
		Candidate/	Officeholder/Political Comm	ııttee	membership due	!S	
	0 1: 0:::::::::::::::::::::::::::::::::	0 111 127			0.00		Off. 1
	Complete ONLY if direct expenditure to benefit	Candidate/Office	nolder name		Office sought		Office held
L	C/OH						

SCHEDULE G

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		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains		xpense Vages/Contract Labor	Travel	in District Out of District R (enter a category not listed above)
1	Total pages Schedule G: Sch: 5/6 Rpt: 11/13	2 FILER Longi	NAME no, Tristan H. (The Honorable)			3 Filer 0008	ID (Ethics Commission Filers) 31777
4	Date	5 Payee	name			l	
	01/25/2021	l	s Association of District Judges				
6	Amount (\$)	7 Payee	address; City; State;	Zip Co	ode		
	\$20.89	РО В	ox 1748				
	Reimbursement from political contributions intended	Austii	n, TX 78767				
8	PURPOSE	(a) Categ	Ory (See Categories listed at the top of this scho	edule)	(b) Description	Check if to	ravel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Fees				Check if A	Austin, TX, officeholder living expense
					membership due	S	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate	/Officeholder name		Office sought		Office held
	Date	Payee	name				
	03/17/2021	Texas	s Board of Legal Specialization				
	Amount (\$)	Payee	address; City; State;	Zip Co	ode		
	\$125.00	505 E	E. Huntland Drive				
	Reimbursement from political contributions	Suite	400, LB 28				
	X political contributions intended	Austir	n, TX 78752				
	PURPOSE	Categ	Ory (See Categories listed at the top of this scho	edule)	Description	_	ravel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Fees			L	_	Austin, TX, officeholder living expense
					board certification	n aues	
	Complete ONLY if direct	Candidato	/Officeholder name		Office sought		Office held
	expenditure to benefit	Carididate	Officeriolider flame		Office Sought		Office field
	C/OH						
	Date	Payee	name				
	04/16/2021	Unite	d States Postal Service				
	Amount (\$)	Payee	address; City; State;	Zip Co	ode		
	\$59.00	1050	5 Town & Country Way				
	X Reimbursement from political contributions intended	Hous	ton, TX 77024-9998				
	PURPOSE	Categ	Ory (See Categories listed at the top of this scho	edule)	Description	_	ravel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Office	e Overhead/Rental Expense		L	Check if A	Austin, TX, officeholder living expense
					PO box		
	Complete ONLY if direct	Candidata	/Officeholder name		Office cought		Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Canuluale	Concenduel Hattle		Office sought		Onice rielu

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 6/6 Rpt: 12/13 Longino, Tristan H. (The Honorable) 00081777 Date Payee name 01/11/2021 Zoom Video Communications Inc 6 Amount (\$) Payee address; State; Zip Code City; 55 Almaden Blvd \$246.39 6th Flr Reimbursement from political contributions intended Х San Jose, CA 95113 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense **EXPENDITURE** Zoom subscriptions Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 13/13 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Longino, Tristan H. (The Honorable) 00081777 5 Name of person from whom amount is received 8 Amount (\$) 06/16/2021 \$0.29 Frost Bank 6 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78205 Purpose for which amount is received Check if political contribution returned to filer account interest