



Official Filing Authority of Harris County  
Clifford Tatum  
Elections Administrator

### Campaign Finance Report



Elections Administrator  
Harris County, TX

FileNo: 2023162

Received By Clerk: 07/14/2023

File Date: July 14, 2023

Office: District Attorney

Candidate: Ogg, Kim

Treasurer: Poerschke, Scott

Category: Contributions And Expenditures (COH / JCOH)

Delivered By: Courier

Type: COR

Harris County No Fee

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

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

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID	<b>2</b> Total pages filed: 50				
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Kim	MI	<b>OFFICE USE ONLY</b>			
	NICKNAME	LAST Ogg	SUFFIX				
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE	Date Hand-delivered or Date Postmarked			
	2450 Louisiana Suite 400-773 Houston, TX 77006			Receipt #      Amount			
				Date Processed			
				Date Imaged			
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Scott	MI				
	NICKNAME	LAST Poerschke	SUFFIX				
<b>6</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
	5111 Center St.			Houston	Texas	77007	
<b>7</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	713	721-16900					
<b>8</b> REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)						
<b>9</b> PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
	01	01	2023		06	30	2023
<b>10</b> ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	
	03	05	2024	<input type="checkbox"/> General	<input type="checkbox"/> Special		
<b>11</b> OFFICE	OFFICE HELD (if any) District Attorney, Harris County			<b>12</b> OFFICE SOUGHT (if known) District Attorney, Harris County			

**GO TO PAGE 2**

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM C/OH  
COVER SHEET PG 2**

2 of 50

<b>13 C / OH NAME</b> Ogg, Kim	<b>14 Filer ID</b>
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**15 NOTICE FROM POLITICAL COMMITTEE(S)**  
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<table border="1" style="width:100%"> <tr><td>COMMITTEE TYPE</td><td>COMMITTEE NAME</td></tr> <tr><td>COMMITTEE ADDRESS</td><td></td></tr> <tr><td>COMMITTEE CAMPAIGN TREASURER NAME</td><td></td></tr> <tr><td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td><td></td></tr> </table>	COMMITTEE TYPE	COMMITTEE NAME	COMMITTEE ADDRESS		COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS	
COMMITTEE TYPE	COMMITTEE NAME								
COMMITTEE ADDRESS									
COMMITTEE CAMPAIGN TREASURER NAME									
COMMITTEE CAMPAIGN TREASURER ADDRESS									


<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	55,695.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	28,571.24
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	274,748.76
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	48,489.64

**17 AFFIDAVIT**

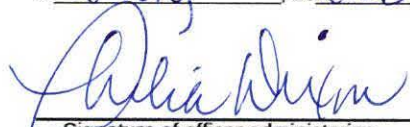


AFFIX NOTARY STAMP / SEAL ABOVE

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

  
 \_\_\_\_\_  
 Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Kim Ogg, this the 14th day of July, 2023, to certify which, witness my hand and seal of office.

  
 \_\_\_\_\_  
 Signature of officer administering

Shelia Dixon

 \_\_\_\_\_  
 Printed name of officer administering

Notary

 \_\_\_\_\_  
 Title of officer administering oath

**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> Ogg, Kim	<b>19 Filer ID</b>
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<b>20 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
NAME OF SCHEDULE		
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	53,745.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	1,950.00
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	21,216.63
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	7,354.61
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	61.37

Unofficial Copy

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/18 Rpt: 4/50
2 FILER NAME Ogg, Kim		3 Filer ID
4 Date 04/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adamo, Sam	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 3200 Travis St 4Th Floor  Houston, TX 77006		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self Employed
Date 05/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarado, Gilbert	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 32115 Casa Linda Dr  Hockley, TX 77447		
Principal occupation / Job title (See Instructions) Attorney at Law		Employer (See Instructions) Law Offices of Gilbert J. Alvarado
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Barbara	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 25015 Hessett Creek Dr.  Porter, TX 77365		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) HCDAO
Date 06/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballard, Brooks	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 309 Gray St Ste 108 Houston, TX 77002		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Engel & Völkers
Date 05/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barney, Karen	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 827 Worthshire St  Houston, TX 77008		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) HCDAO

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/18 Rpt: 5/50
2 FILER NAME Ogg, Kim		3 Filer ID
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Robert	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Suite 310 405 Main St. Houston, TX 77002		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Bennett Law Firm
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Booker II, Sam	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 6767 Long Dr #141 Houston, TX 77087		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradford, C.O.	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 3912 Roseneath Dr Houston, TX 77021		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) HCD AO
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burkes-Jones, Trina	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 14623 Burleson Bend Dr Houston, TX 77049		
Principal occupation / Job title (See Instructions) Investigator		Employer (See Instructions) HCD AO
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cagney, Rick	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 9130 Bassoon Dr Houston, TX 77025		
Principal occupation / Job title (See Instructions) Mediator/Arbitrator		Employer (See Instructions) Self-employed

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/18 Rpt: 6/50
2 FILER NAME Ogg, Kim		3 Filer ID
4 Date 06/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cortez, Sheri	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 8722 Sterlingame Dr Houston, TX 77031		
8 Principal occupation / Job title (See Instructions) Contractor		9 Employer (See Instructions) Self
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Rick	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 1300 Post Oak Blvd #1650 Houston, TX 77056		
Principal occupation / Job title (See Instructions) Real Estate Development and Construction		Employer (See Instructions) CityStreet
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Larry	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 8427 Bluegate Ct Houston, TX 77025		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Clark	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 708 Tirrell St Houston, TX 77019		
Principal occupation / Job title (See Instructions) Development Director		Employer (See Instructions) Transwestern Development Company
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Kathleen	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 1319 W Forest Dr Houston, TX 77043		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Spring Branch ISD

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/18 Rpt: 7/50
<b>2</b> FILER NAME Ogg, Kim		<b>3</b> Filer ID
<b>4</b> Date 05/24/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Driscoll, Victor <hr/> <b>6</b> Contributor address; City; State; Zip Code 2429 Bissonnet, Ste. 605  Houston, TX 77005	<b>7</b> Amount of Contribution (\$) \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Self Employed
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dwyer, Sally <hr/> Contributor address; City; State; Zip Code 2238 Albans Rd  Houston, TX 77005	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Forrest, Alex <hr/> Contributor address; City; State; Zip Code 101 Westcott Ste 304 Houston, TX 77007	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Harris County
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garver, C.M. <hr/> Contributor address; City; State; Zip Code 1901 Lexington  Houston, TX 77098	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) BRH-Garver Construction L.P.
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goldfield, Barbara <hr/> Contributor address; City; State; Zip Code 515 Archwood Trail  Houston, TX 77007	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Co-Owner		Employer (See Instructions) Nathan Siegel Co.

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/18 Rpt: 8/50
2 FILER NAME Ogg, Kim		3 Filer ID
4 Date 06/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Nayesha	7 Amount of Contribution (\$) \$25.00
6 Contributor address: City; State; Zip Code 2121 El Paseo St Unit 1705 Houston, TX 77054		
8 Principal occupation / Job title (See Instructions) Office Manager		9 Employer (See Instructions) John Green CPA Attorney at Law
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hand, Robert	Amount of Contribution (\$) \$1,000.00
Contributor address: City; State; Zip Code 12203 Taylorcrest Rd Houston, TX 77024		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Stevenson & Murray LLP
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hazen, James	Amount of Contribution (\$) \$500.00
Contributor address: City; State; Zip Code 708 Tirrell St Houston, TX 77019		
Principal occupation / Job title (See Instructions) Administrative		Employer (See Instructions) Cenacle Properties LLC
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heard, Michael	Amount of Contribution (\$) \$100.00
Contributor address: City; State; Zip Code 4310 Dunlavy St Apt. 457 Houston, TX 77006		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) The Heard Institute
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helfman, Alan	Amount of Contribution (\$) \$1,000.00
Contributor address: City; State; Zip Code 8727 Crescent Gate Houston, TX 77024		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) River Oaks Chrysler Dodge Dealership

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/18 Rpt: 9/50
<b>2</b> FILER NAME Ogg, Kim		<b>3</b> Filer ID
<b>4</b> Date 05/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Carolyn  <b>6</b> Contributor address; City; State; Zip Code 2822 Clay St  Houston, TX 77003	<b>7</b> Amount of Contribution (\$) \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Director of Instruction		<b>9</b> Employer (See Instructions) Harmony Public Schools
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillegeist, JoAnne  Contributor address; City; State; Zip Code PO Box 130266  Houston, TX 77219	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-employed
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Jack  Contributor address; City; State; Zip Code 612 W 26th St  Houston, TX 77008	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) N/A
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Nishan  Contributor address; City; State; Zip Code 17006 Summer Hollow Dr None Sugar Land, TX 77489	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self-Employed
Date 05/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khatami, Sharareh  Contributor address; City; State; Zip Code 12303 Longworth  Houston, TX 77024	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) N/A

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A1: Sch: 7/18 Rpt: 10/50</p>
<p>2 FILER NAME Ogg, Kim</p>		<p>3 Filer ID</p>
<p>4 Date 04/24/2023</p>	<p>5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kherkher, Steve</p> <p>6 Contributor address; City; State; Zip Code 8441 Gulf Fwy #600 Houston, TX 77017</p>	<p>7 Amount of Contribution (\$) \$1,000.00</p>
<p>8 Principal occupation / Job title (See Instructions) Attorney</p>		<p>9 Employer (See Instructions) Williams Kherkher Hart Boundas, LLP</p>
<p>Date 06/02/2023</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Vivian</p> <p>Contributor address; City; State; Zip Code 3220 Calumet Houston, TX 77004</p>	<p>Amount of Contribution (\$) \$1,000.00</p>
<p>Principal occupation / Job title (See Instructions) Attorney</p>		<p>Employer (See Instructions) HCDAO</p>
<p>Date 04/24/2023</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirkland, Steven</p> <p>Contributor address; City; State; Zip Code 1817 Lubbock Houston, TX 77007</p>	<p>Amount of Contribution (\$) \$500.00</p>
<p>Principal occupation / Job title (See Instructions) Attorney</p>		<p>Employer (See Instructions) City of Nacogdoches</p>
<p>Date 04/25/2023</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirkpatrick, Eric</p> <p>Contributor address; City; State; Zip Code 3100 Timmons Ln Suite 401 Houston, TX 77027</p>	<p>Amount of Contribution (\$) \$500.00</p>
<p>Principal occupation / Job title (See Instructions) Attorney</p>		<p>Employer (See Instructions) Kirkpatrick Law Office</p>
<p>Date 06/02/2023</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kolenc, Michael</p> <p>Contributor address; City; State; Zip Code 655 Yale St Houston, TX 77007</p>	<p>Amount of Contribution (\$) \$100.00</p>
<p>Principal occupation / Job title (See Instructions) CN4</p>		<p>Employer (See Instructions) Vice President</p>

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/18 Rpt: 11/50
<b>2</b> FILER NAME Ogg, Kim		<b>3</b> Filer ID
<b>4</b> Date 05/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kretzer, Seth  <b>6</b> Contributor address; City; State; Zip Code 440 Louisiana 1440 Houston, TX 77002	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Law Office of Seth Kretzer
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kugler, Claire  Contributor address; City; State; Zip Code 5608 Evergreen St  Bellaire, TX 77401	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis LLP
Date 05/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kummins, Richard  Contributor address; City; State; Zip Code 886 Augusta Dr  Houston, TX 77057	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Public Speaking Trainer		Employer (See Instructions) Self-Employed
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawson, Donald  Contributor address; City; State; Zip Code PO Box 50274  Austin, TX 78763	Amount of Contribution (\$)  \$69.00
Principal occupation / Job title (See Instructions) Art Dealer		Employer (See Instructions) Self
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Lawrence  Contributor address; City; State; Zip Code 9320 Harwin Dr  Houston, TX 77036	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Harwin Choice, LLC

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/18 Rpt: 12/50
2 FILER NAME Ogg, Kim		3 Filer ID
4 Date 05/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lesikar, Woody	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address: City; State; Zip Code PO Box 941789 Houston, TX 77094		
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) West Houston Airport
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liang, Jenny	Amount of Contribution (\$) \$1,000.00
Contributor address: City; State; Zip Code 6514 Community Dr Houston, TX 77005		
Principal occupation / Job title (See Instructions) JL Realty		Employer (See Instructions) Self
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Looney & Conrad P.C.	Amount of Contribution (\$) \$5,000.00
Contributor address: City; State; Zip Code 11767 Katy Fwy Ste 740 Houston, TX 77079		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marquez, Vincent	Amount of Contribution (\$) \$1,000.00
Contributor address: City; State; Zip Code 712 Harrington St Houston, TX 77009		
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) VAM GROUP LLC
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazzagatti, Linda	Amount of Contribution (\$) \$500.00
Contributor address: City; State; Zip Code 6750 W Loop South #235 Houston, TX 77401		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) HCD AO

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/18 Rpt: 13/50
2 FILER NAME Ogg, Kim		3 Filer ID
4 Date 05/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mikulenka, Gene	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 3231 Allen Pkwy 1310 Houston, TX 77019		
8 Principal occupation / Job title (See Instructions) Advertising Media Manager		9 Employer (See Instructions) Out Smart
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitcham, David	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 405 Main St. Suite 401 Housotn, TX 77002		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) HCDAO
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mize, Katherine	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 1319 Harvard  Houston, TX 77008		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Mize PC
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Daryl	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 2508B Mandell  Houston, TX 77006		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) AZA Lawfirm
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Steve	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 100 Glenborough Dr Ste 1000 Houston, TX 77060		
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Villa Serena Communities

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/18 Rpt: 14/50
2 FILER NAME Ogg, Kim		3 Filer ID
4 Date 06/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muessig, Craig	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 3500 N Main  Baytown, TX 77521	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self Employed
Date 05/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Susanne	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 114 Cinnamon Oak Ln  Houston, TX 77079	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self Employed
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Brien, Gerard	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 1302 Waugh Dr #444 Houston, TX 77019	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Orion Ambulance Services
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Ginger Travis	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 1305 Chesire Ln  Houston, TX 77018	
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self-employed
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pasternak, Jeanne	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 451 Hunterwood Dr  Houston, TX 77024	
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/18 Rpt: 15/50
2 FILER NAME Ogg, Kim		3 Filer ID
4 Date 05/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pelton, Robert	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 4001 N Shepherd Dr Suite 200 Houston, TX 77008		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Pelton Law Offices
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Marisela	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 5927 Rutherglenn Dr Houston, TX 77096		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reddy, Raja (Dr.)	Amount of Contribution (\$) \$1,116.00
Contributor address; City; State; Zip Code 5134 Isidore Ln Missouri City, TX 77459		
Principal occupation / Job title (See Instructions) Pulmonologist		Employer (See Instructions) Self- Employed
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbins, Christian	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 20090 Avenue of the Oaks Newhall, CA 91387		
Principal occupation / Job title (See Instructions) HR Consultant		Employer (See Instructions) GS Retrofit
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saenz, Gracie	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 1108 Hackney St Houston, TX 77023		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Graciela Saenz

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/18 Rpt: 16/50
2 FILER NAME Ogg, Kim		3 Filer ID
4 Date 04/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samuels, Robert	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code 5207 Bangor Dr  Kensington, MD 20895	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sargent, Marentha	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 1836 Harbour Crest Dr  Seabrook, TX 77586	
Principal occupation / Job title (See Instructions) Product Sales Specialist		Employer (See Instructions) PA Inc
Date 02/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schatte, Andrew	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code 1600 Highway 6 S Suite 245 Houston, TX 77478	
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Stonehedge Holdings, LLC
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneider, Joseph	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code 13802 County Road 185  Alvin, TX 77511	
Principal occupation / Job title (See Instructions) Holmes Road Recycling		Employer (See Instructions) Owner
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Eric	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 1623 Quail Run  Brookshire, TX 77423	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/18 Rpt: 17/50
<b>2</b> FILER NAME Ogg, Kim		<b>3</b> Filer ID
<b>4</b> Date 06/02/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shum, Joseph  <b>6</b> Contributor address; City; State; Zip Code 9400 Harwin Drive  Houston, TX 77036	<b>7</b> Amount of Contribution (\$)  \$2,000.00
<b>8</b> Principal occupation / Job title (See Instructions) President		<b>9</b> Employer (See Instructions) Self Employed
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snively, Judith  Contributor address; City; State; Zip Code 1866 W McKinney # C  Houston, TX 77019	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Harris County
Date 02/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spartz, Elvira  Contributor address; City; State; Zip Code 2814 South Bartell St Apt. J213 Houston, TX 77054	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) International Development		Employer (See Instructions) Healthcare Professional
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spartz, Elvira  Contributor address; City; State; Zip Code 2814 South Bartell St Apt. J213 Houston, TX 77054	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) International Development		Employer (See Instructions) Healthcare Professional
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spartz, Elvira  Contributor address; City; State; Zip Code 2814 South Bartell St Apt. J213 Houston, TX 77054	Amount of Contribution (\$)  \$110.00
Principal occupation / Job title (See Instructions) International Development		Employer (See Instructions) Healthcare Professional

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/18 Rpt: 18/50
2 FILER NAME Ogg, Kim		3 Filer ID
4 Date 05/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stafford, James	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 515 Caroline St Houston, TX 77002		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 06/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steptoe , Jerry	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 7860 Belroit Houston, TX 77028		
Principal occupation / Job title (See Instructions) Police Officer		Employer (See Instructions) HISD PD
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stiles, Kevin	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 3231 Allen Pkwy Unit 2108 Houston, TX 77019		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, MaryRoss	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code PO Box 667398 Houston, TX 77266		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, MaryRoss	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code PO Box 667398 Houston, TX 77266		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/18 Rpt: 19/50
2 FILER NAME Ogg, Kim		3 Filer ID
4 Date 03/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, MaryRoss	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code PO Box 667398  Houston, TX 77266		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 04/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, MaryRoss	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code PO Box 667398  Houston, TX 77266		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, MaryRoss	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code PO Box 667398  Houston, TX 77266		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, MaryRoss	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code PO Box 667398  Houston, TX 77266		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Cweren Law Firm, PLLC	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code 3311 Richmond Ave Suite 305 Houston, TX 77098		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/18 Rpt: 20/50
2 FILER NAME Ogg, Kim		3 Filer ID
4 Date 05/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tijerina, Ed	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 8003 Royal Crest Ct Spring, TX 77379		
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Self-Employed
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Upton, Bridget	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 801 Damon Ct Houston, TX 77006		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Chuck	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 550 Westcott St. Ste. 430 Houston, TX 77007		
Principal occupation / Job title (See Instructions) Investment Banker		Employer (See Instructions) Infinity Energy Capital, Inc.
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weil, Peter	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 312 W 17th St Houston, TX 77008		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiner, Kane	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code 2803 Buffalo Speedway Houston, TX 77098		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Texas Crude Energy, LLC

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

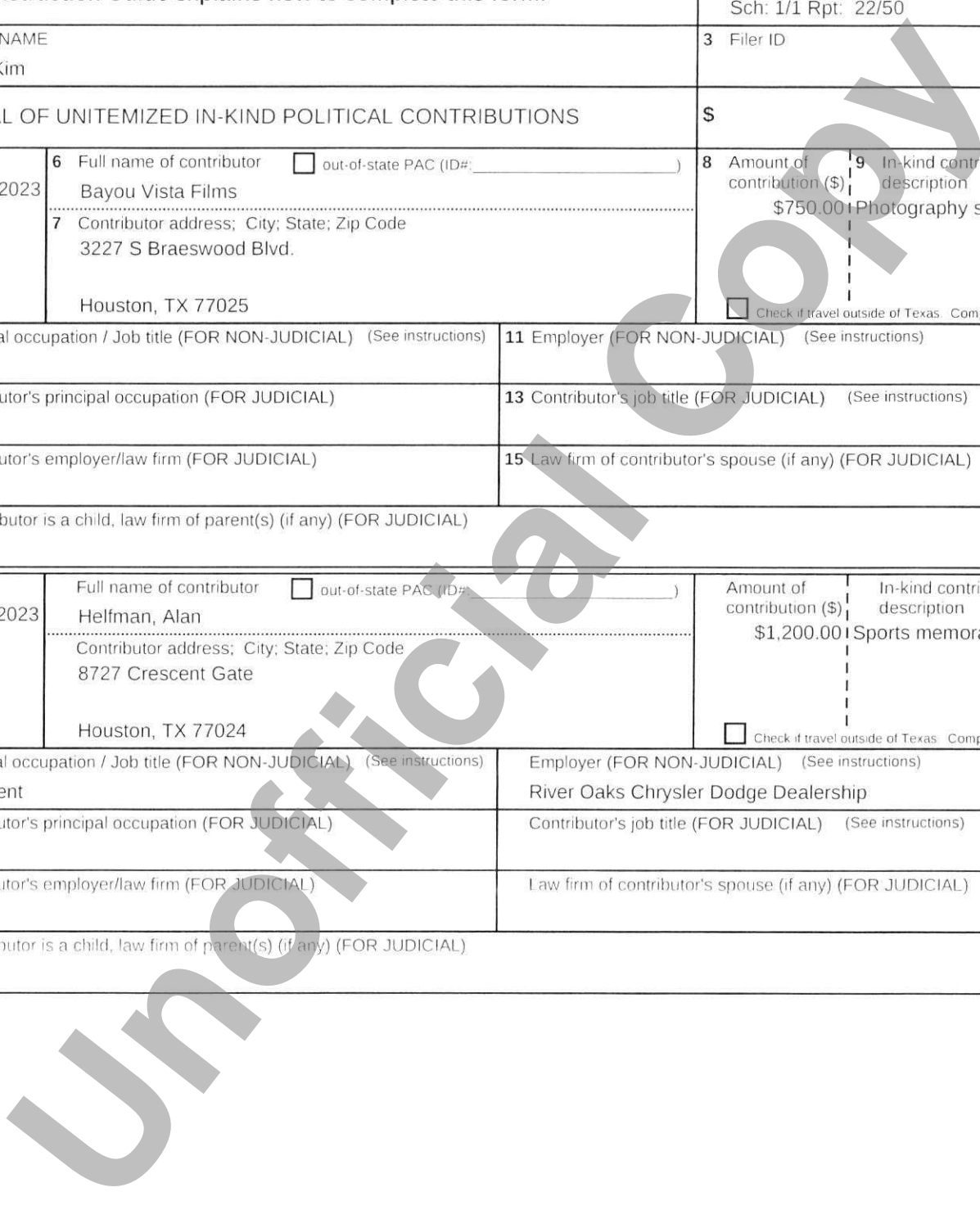
<p><b>The Instruction Guide explains how to complete this form.</b></p>		<p><b>1</b> Total pages Schedule A1: Sch: 18/18 Rpt: 21/50</p>
<p><b>2</b> FILER NAME Ogg, Kim</p>		<p><b>3</b> Filer ID</p>
<p><b>4</b> Date 05/26/2023</p>	<p><b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worley, Alex</p> <hr/> <p><b>6</b> Contributor address: City; State; Zip Code 10711 Cedar Creek Dr  Houston, TX 77042</p>	<p><b>7</b> Amount of Contribution (\$) \$25.00</p>
<p><b>8</b> Principal occupation / Job title (See Instructions) Student</p>		<p><b>9</b> Employer (See Instructions) N/A</p>
<p>Date 05/24/2023</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zozaya, Graciela</p> <hr/> <p>Contributor address: City; State; Zip Code 303 Staffors St  Houston, TX 77079</p>	<p>Amount of Contribution (\$) \$50.00</p>
<p>Principal occupation / Job title (See Instructions) Advisor</p>		<p>Employer (See Instructions) Language Access</p>

Unofficial Copy

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 22/50	
2 FILER NAME Ogg, Kim		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 05/30/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bayou Vista Films	8 Amount of contribution (\$) \$750.00	9 In-kind contribution description Photography services
7 Contributor address; City; State; Zip Code 3227 S Braeswood Blvd.  Houston, TX 77025		<input type="checkbox"/> Check if travel outside of Texas Complete Schedule T	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helfman, Alan	Amount of contribution (\$) \$1,200.00	In-kind contribution description Sports memorabilia
Contributor address; City; State; Zip Code 8727 Crescent Gate  Houston, TX 77024		<input type="checkbox"/> Check if travel outside of Texas Complete Schedule T	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) President		Employer (FOR NON-JUDICIAL) (See instructions) River Oaks Chrysler Dodge Dealership	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/14 Rpt: 23/50	2 FILER NAME Ogg, Kim	3 Filer ID
--	--------------------------	------------

4 Date 02/17/2023	5 Payee name Bayou Vista Films
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6 Amount (\$) \$487.50	7 Payee address; City; State; Zip Code 3227 S Braeswood Blvd.  Houston, TX 77025
---------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography services
--------------------------	---	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 03/14/2023	Payee name Carpenter, Anna
--------------------	-------------------------------

Amount (\$) \$2,835.00	Payee address; City; State; Zip Code 26906 Henson Falls Dr.  Katy, TX 77494
---------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting services
------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/22/2023	Payee name Chase Bank
--------------------	--------------------------

Amount (\$) \$2,809.17	Payee address; City; State; Zip Code 270 Park Avenue Manhattan New York, NY 10017
---------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Payment
------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/14 Rpt: 24/50	<b>2</b> FILER NAME Ogg, Kim	<b>3</b> Filer ID
<b>4</b> Date 05/22/2023	<b>5</b> Payee name Chase Bank	
<b>6</b> Amount (\$) \$34.15	<b>7</b> Payee address; City; State; Zip Code 270 Park Avenue Manhattan New York, NY 10017	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Payment
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 04/21/2023	Payee name Chase Bank	
Amount (\$) \$153.47	Payee address; City; State; Zip Code 270 Park Avenue Manhattan New York, NY 10017	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Payment
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 03/22/2023	Payee name Chase Bank	
Amount (\$) \$2,538.75	Payee address; City; State; Zip Code 270 Park Avenue Manhattan New York, NY 10017	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Payment
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation/Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/14 Rpt: 25/50	<b>2</b> FILER NAME Ogg, Kim	<b>3</b> Filer ID
<b>4</b> Date 02/22/2023	<b>5</b> Payee name Chase Bank	
<b>6</b> Amount (\$) \$78.40	<b>7</b> Payee address; City; State; Zip Code 270 Park Avenue Manhattan New York, NY 10017	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX officeholder living expense Monthly Payment
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/22/2023	Payee name Chase Bank	
Amount (\$) \$127.76	Payee address; City; State; Zip Code 270 Park Avenue Manhattan New York, NY 10017	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX officeholder living expense Monthly Payment
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 05/17/2023	Payee name Elks Lodge #2322	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 623 Hanson Rd Kemah, TX 77565	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX officeholder living expense T-shirts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/14 Rpt: 26/50	<b>2</b> FILER NAME Ogg, Kim	<b>3</b> Filer ID
<b>4</b> Date 06/27/2023	<b>5</b> Payee name Garcia, Ansel	
<b>6</b> Amount (\$) \$202.00	<b>7</b> Payee address; City; State; Zip Code 12751 Edgewood Pk. Dr  Houston, TX 77038	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Content Creator
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 01/09/2023	Payee name Harris County Federal Credit Union	
Amount (\$) \$58.00	Payee address; City; State; Zip Code 1400 Franklin St  Houston, TX 77002	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 01/09/2023	Payee name Harris County Federal Credit Union	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 1400 Franklin St  Houston, TX 77002	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/14 Rpt: 27/50		2 FILER NAME Ogg, Kim		3 Filer ID	
4 Date 06/22/2023		5 Payee name Koerber , Nata			
6 Amount (\$) \$500.00		7 Payee address; City; State; Zip Code 3110 Southmore Blvd # 3 Houston, TX 77004			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event representation	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/16/2023		Payee name Koerber , Nata			
Amount (\$) \$500.00		Payee address; City; State; Zip Code 3110 Southmore Blvd # 3 Houston, TX 77004			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event representation	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/26/2023		Payee name Koerber , Nata			
Amount (\$) \$500.00		Payee address; City; State; Zip Code 3110 Southmore Blvd # 3 Houston, TX 77004			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event representation	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/14 Rpt: 28/50	<b>2</b> FILER NAME Ogg, Kim	<b>3</b> Filer ID
<b>4</b> Date 06/13/2023	<b>5</b> Payee name Nation Builder	
<b>6</b> Amount (\$) \$200.00	<b>7</b> Payee address; City; State; Zip Code 520 South Grand Ave, 2nd Floor  Los Angeles, CA 90071	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online platform
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 05/31/2023	Payee name Nation Builder	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 520 South Grand Ave, 2nd Floor  Los Angeles, CA 90071	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online platform
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 04/28/2023	Payee name Nation Builder	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 520 South Grand Ave, 2nd Floor  Los Angeles, CA 90071	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online platform
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/14 Rpt: 29/50	<b>2</b> FILER NAME Ogg, Kim	<b>3</b> Filer ID
<b>4</b> Date 03/31/2023	<b>5</b> Payee name Nation Builder	
<b>6</b> Amount (\$) \$40.32	<b>7</b> Payee address; City; State; Zip Code 520 South Grand Ave, 2nd Floor  Los Angeles, CA 90071	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense. Online platform
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 05/17/2023	Payee name Ogg, Kim	
Amount (\$) \$149.89	Payee address; City; State; Zip Code 612 W. 26th St.  Houston, TX 77008	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense. Constituent Meeting/Fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 05/17/2023	Payee name Ogg, Kim	
Amount (\$) \$20.00	Payee address; City; State; Zip Code 612 W. 26th St.  Houston, TX 77008	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense. Parking expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

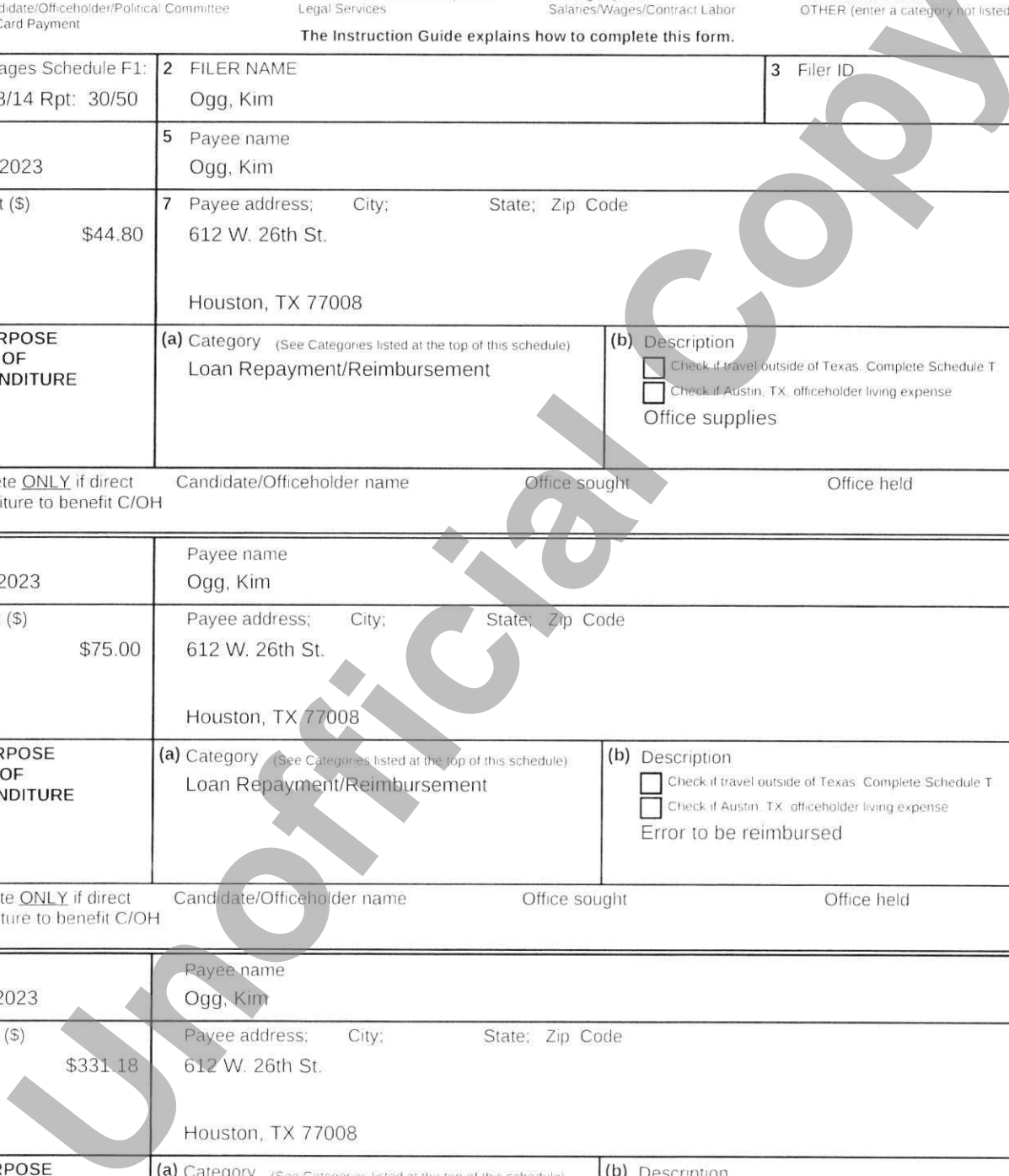
SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/Donations Made By -          | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/14 Rpt: 30/50	<b>2</b> FILER NAME Ogg, Kim	<b>3</b> Filer ID
<b>4</b> Date 05/17/2023	<b>5</b> Payee name Ogg, Kim	
<b>6</b> Amount (\$) \$44.80	<b>7</b> Payee address; City; State; Zip Code 612 W. 26th St.  Houston, TX 77008	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 05/17/2023	Payee name Ogg, Kim	
Amount (\$) \$75.00	Payee address; City; State; Zip Code 612 W. 26th St.  Houston, TX 77008	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Error to be reimbursed
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 05/17/2023	Payee name Ogg, Kim	
Amount (\$) \$331.18	Payee address; City; State; Zip Code 612 W. 26th St.  Houston, TX 77008	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Constituent meeting
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/14 Rpt: 31/50		2 FILER NAME Ogg, Kim		3 Filer ID	
4 Date 03/30/2023		5 Payee name Ogg, Kim			
6 Amount (\$) \$129.31		7 Payee address; City; State; Zip Code 612 W. 26th St.  Houston, TX 77008			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Constituent meeting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/01/2023		Payee name Ogg, Kim			
Amount (\$) \$37.83		Payee address; City; State; Zip Code 612 W. 26th St.  Houston, TX 77008			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/28/2023		Payee name Ogg, Kim			
Amount (\$) \$228.96		Payee address; City; State; Zip Code 612 W. 26th St.  Houston, TX 77008			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Constituent meeting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/14 Rpt: 32/50	<b>2</b> FILER NAME Ogg, Kim	<b>3</b> Filer ID
<b>4</b> Date 02/28/2023	<b>5</b> Payee name Ogg, Kim	
<b>6</b> Amount (\$) \$35.40	<b>7</b> Payee address; City: State; Zip Code 612 W. 26th St.  Houston, TX 77008	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX officeholder living expense. Postage
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/20/2023	Payee name Ogg, Kim	
Amount (\$) \$424.03	Payee address; City: State; Zip Code 612 W. 26th St.  Houston, TX 77008	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX officeholder living expense Constituent lunch meetings/ Fundraising dinner
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/20/2023	Payee name Ogg, Kim	
Amount (\$) \$425.33	Payee address; City: State; Zip Code 612 W. 26th St.  Houston, TX 77008	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX officeholder living expense Constituent meeting/Lunch meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

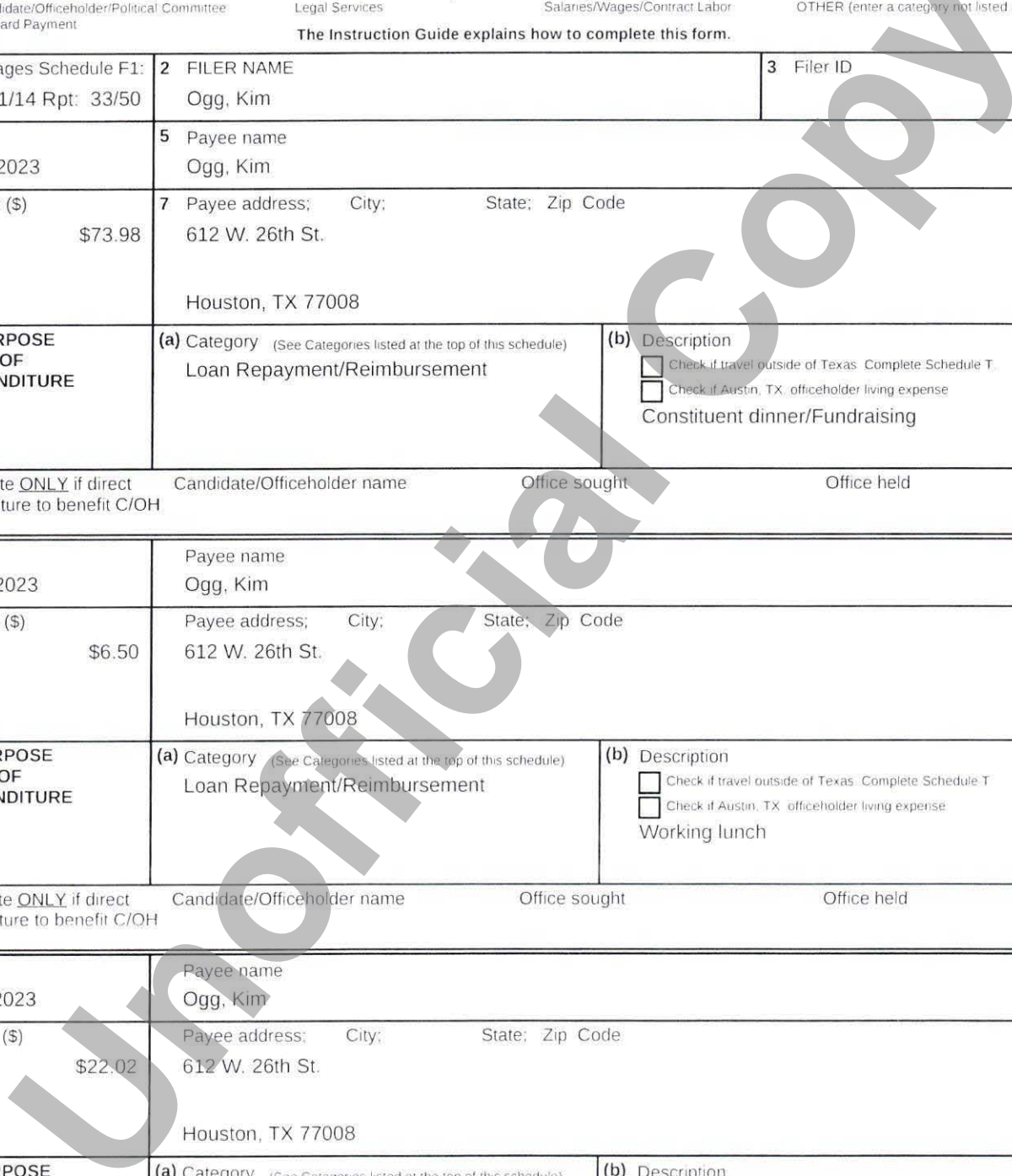
Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/14 Rpt: 33/50		2 FILER NAME Ogg, Kim		3 Filer ID	
4 Date 02/06/2023		5 Payee name Ogg, Kim			
6 Amount (\$) \$73.98		7 Payee address; City; State; Zip Code 612 W. 26th St.  Houston, TX 77008			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Constituent dinner/Fundraising	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/22/2023		Payee name Ogg, Kim			
Amount (\$) \$6.50		Payee address; City; State; Zip Code 612 W. 26th St.  Houston, TX 77008			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Working lunch	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/13/2023		Payee name Ogg, Kim			
Amount (\$) \$22.02		Payee address; City; State; Zip Code 612 W. 26th St.  Houston, TX 77008			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Working lunch	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting/Donation                        | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/Donations Made By -          | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/14 Rpt: 34/50	<b>2</b> FILER NAME Ogg, Kim	<b>3</b> Filer ID
<b>4</b> Date 05/02/2023	<b>5</b> Payee name Ogg, Kim	
<b>6</b> Amount (\$) \$345.40	<b>7</b> Payee address; City; State; Zip Code 612 W. 26th St.  Houston, TX 77008	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Constituent meetings/ Fundraising
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 06/29/2023	Payee name Pronin, Art	
Amount (\$) \$500.00	Payee address; City; State; Zip Code Arthur Pronin  Houston, TX 77096	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event representation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 06/13/2023	Payee name Rasheed, Rafay	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 4623 Mimosa Dr.  Bellaire, TX 77401	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Security
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/14 Rpt: 35/50		2 FILER NAME Ogg, Kim		3 Filer ID	
4 Date 05/18/2023		5 Payee name Sprint 2 Print			
6 Amount (\$) \$5,661.48		7 Payee address; City: State: Zip Code 8748 Clay Rd Suite 300 Houston, TX 77080			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs/T-Shirts	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/02/2023		Payee name Square, Inc.			
Amount (\$) \$16.00		Payee address; City: State: Zip Code 1455 Market Street, Suite 600 San Francisco, CA 94103			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online platform	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/22/2023		Payee name Texas Campaigns			
Amount (\$) \$300.00		Payee address; City: State: Zip Code 9600 Glenfield Ct Ste 148 Houston, TX 77096-3869			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event representation	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

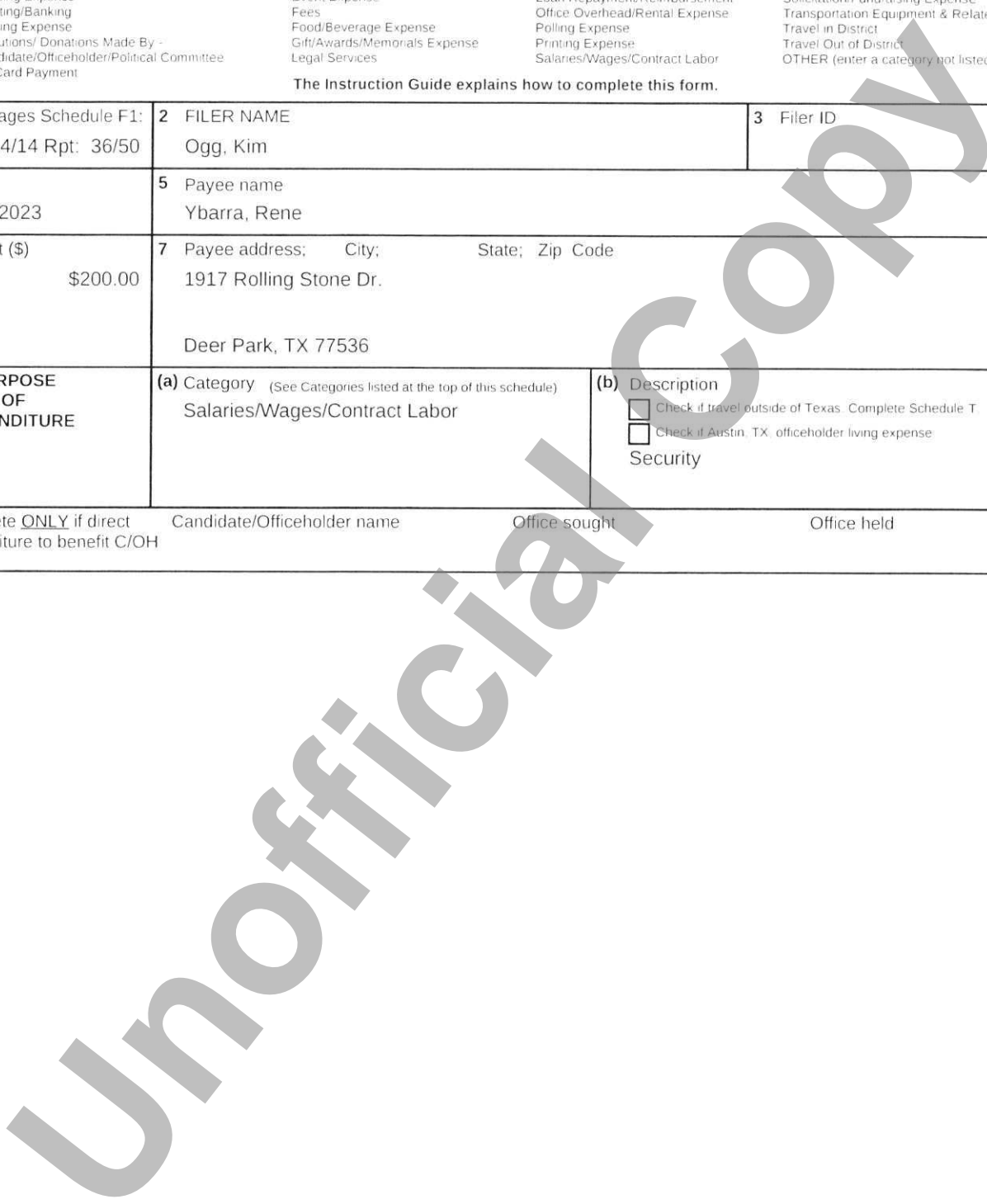
SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/14 Rpt: 36/50	2 FILER NAME Ogg, Kim	3 Filer ID
4 Date 06/13/2023	5 Payee name Ybarra, Rene	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 1917 Rolling Stone Dr.  Deer Park, TX 77536	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense. Security
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held



# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By           | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political 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 F4: Sch: 1/12 Rpt: 37/50	2 FILER NAME Ogg, Kim		3 Filer ID
4 CREDIT CARD ISSUER	Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$52.77	(b) Date of Charge 05/29/2023	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Officemax/Depot	(b) Payee address; City, State, Zip Code 23610 Westheimer Pkwy Katy, TX 77494	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Event Signs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$82.01	(b) Date of Charge 06/02/2023	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Rodeo Goat	(b) Payee address; City, State, Zip Code 2105 Dallas St Houston, TX 77003	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Staff Lunch Meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$5.62	(b) Date of Charge 06/02/2023	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name El Rey	(b) Payee address; City, State, Zip Code 233 N Loop West Houston, TX 77008	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Work Lunch
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political 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 F4: Sch: 2/12 Rpt: 38/50	2 FILER NAME Ogg, Kim	3 Filer ID
4 CREDIT CARD ISSUER	Name of financial institution	
6 PAYMENT	(a) Amount Charged \$12.78	(b) Date of Charge 05/14/2023
7 PAYEE	(a) Payee name Dropbox	(b) Payee address; City, State, Zip Code 333 Brannan Street San Francisco, CA 94107
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Online storage
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
PAYMENT	(a) Amount Charged \$4.32	(b) Date of Charge 05/20/2023
PAYEE	(a) Payee name HP Inc	(b) Payee address; City, State, Zip Code 10300 Energy Drive Spring, TX 77389
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Printer Ink
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
PAYMENT	(a) Amount Charged \$4.32	(b) Date of Charge 04/20/2023
PAYEE	(a) Payee name HP Inc	(b) Payee address; City, State, Zip Code 10300 Energy Drive Spring, TX 77389
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Printer ink
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 3/12 Rpt: 39/50	<b>2</b> FILER NAME Ogg, Kim	<b>3</b> Filer ID
<b>4</b> CREDIT CARD ISSUER	Name of financial institution	<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b> PAYMENT	(a) Amount Charged \$15.98	(b) Date of Charge 02/19/2023
<b>7</b> PAYEE	(a) Payee name Zoom	(c) Date(s) Credit Card Issuer Paid
<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(b) Payee address; City, State, Zip Code 55 Almaden Boulevard 6th Floor San Jose, CA 95113
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	(b) Description Online communication platform
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
<b>PAYMENT</b>	(a) Amount Charged \$1,378.12	(b) Date of Charge 06/01/2023
<b>PAYEE</b>	(a) Payee name Chapman and Kirby	(c) Date(s) Credit Card Issuer Paid
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(b) Payee address; City, State, Zip Code 2118 Lamar St #100 Houston, TX 77003
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	(b) Description Event Venue
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
<b>PAYMENT</b>	(a) Amount Charged \$30.00	(b) Date of Charge 06/13/2023
<b>PAYEE</b>	(a) Payee name Synthesia Academy	(c) Date(s) Credit Card Issuer Paid
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(b) Payee address; City, State, Zip Code Kent House 14/17 Market Place, London W1W 8AJ United Kingdom
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	(b) Description Online software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political 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 F4: Sch: 4/12 Rpt: 40/50		2 FILER NAME Ogg, Kim		3 Filer ID
4 CREDIT CARD ISSUER	Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT	(a) Amount Charged \$17.05	(b) Date of Charge 06/19/2023	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE	(a) Payee name Zoom		(b) Payee address; City, State, Zip Code 55 Almaden Boulevard 6th Floor San Jose, CA 95113	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Online communication platform	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$12.78	(b) Date of Charge 02/14/2023	(c) Date(s) Credit Card Issuer Paid	
PAYEE	(a) Payee name Dropbox		(b) Payee address; City, State, Zip Code 333 Brannan Street San Francisco, CA 94107	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Online storage	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$184.16	(b) Date of Charge 05/29/2023	(c) Date(s) Credit Card Issuer Paid	
PAYEE	(a) Payee name Officemax/Depot		(b) Payee address; City, State, Zip Code 23610 Westheimer Pkwy Katy, TX 77494	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Event signs	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political 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 F4: Sch: 5/12 Rpt: 41/50		2 FILER NAME Ogg, Kim		3 Filer ID	
4 CREDIT CARD ISSUER		Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$8.63	(b) Date of Charge 06/02/2023	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name El Rey		(b) Payee address; City, State, Zip Code 233 N Loop West Houston, TX 77008	
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Work Lunch	
		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought      Office held	
PAYMENT		(a) Amount Charged \$12.78	(b) Date of Charge 06/14/2023	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Dropbox		(b) Payee address; City, State, Zip Code 333 Brannan Street San Francisco, CA 94107	
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Online storage	
		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought      Office held	
PAYMENT		(a) Amount Charged \$4.32	(b) Date of Charge 06/21/2023	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name HP Inc		(b) Payee address; City, State, Zip Code 10300 Energy Drive Spring, TX 77389	
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Printer Ink	
		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought      Office held	

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 6/12 Rpt: 42/50	<b>2</b> FILER NAME Ogg, Kim		<b>3</b> Filer ID
<b>4</b> CREDIT CARD ISSUER	Name of financial institution		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b> PAYMENT	(a) Amount Charged \$66.54	(b) Date of Charge 04/27/2023	(c) Date(s) Credit Card Issuer Paid
<b>7</b> PAYEE	(a) Payee name Hotel Icon	(b) Payee address; City, State, Zip Code 220 Main St Houstrton, TX 77002	
<b>8</b> PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Working lunch
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought      Office held
<b>PAYMENT</b>	(a) Amount Charged \$250.00	(b) Date of Charge 04/27/2023	(c) Date(s) Credit Card Issuer Paid
<b>PAYEE</b>	(a) Payee name Harris County Democratic Party	(b) Payee address; City, State, Zip Code 4619 Lyons Ave Houston, TX 77020	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Club Event Contribution
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought      Office held
<b>PAYMENT</b>	(a) Amount Charged \$100.00	(b) Date of Charge 05/03/2023	(c) Date(s) Credit Card Issuer Paid
<b>PAYEE</b>	(a) Payee name Harris County Democratic Party	(b) Payee address; City, State, Zip Code 4619 Lyons Ave Houston, TX 77020	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Membership
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought      Office held

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 7/12 Rpt: 43/50		2 FILER NAME Ogg, Kim		3 Filer ID	
4 CREDIT CARD ISSUER		Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$763.86	(b) Date of Charge 05/08/2023	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Amazon		(b) Payee address; City, State, Zip Code 410 Terry Avenue North Seattle, WA 98109-5210	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Equipment		(b) Description Laptop computer	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
PAYMENT		(a) Amount Charged \$216.49	(b) Date of Charge 05/09/2023	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Amazon		(b) Payee address; City, State, Zip Code 410 Terry Avenue North Seattle, WA 98109-5210	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Equipment		(b) Description Printer	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
PAYMENT		(a) Amount Charged \$1,378.13	(b) Date of Charge 05/17/2023	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Chapman and Kirby		(b) Payee address; City, State, Zip Code 2118 Lamar St #100 Houston, TX 77003	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Venue deposit	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(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)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 8/12 Rpt: 44/50	2 FILER NAME Ogg, Kim		3 Filer ID
4 CREDIT CARD ISSUER	Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$17.05	(b) Date of Charge 05/19/2023	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Zoom	(b) Payee address; City, State, Zip Code 55 Almaden Boulevard 6th Floor San Jose, CA 95113	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Online communication platform
	(c) <input type="checkbox"/> Check if travel outside of Texas Complete Schedule T <input type="checkbox"/> Check if Austin TX officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
PAYMENT	(a) Amount Charged \$12.78	(b) Date of Charge 04/14/2023	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name HP Inc	(b) Payee address; City, State, Zip Code 10300 Energy Drive Spring, TX 77389	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Printer ink
	(c) <input type="checkbox"/> Check if travel outside of Texas Complete Schedule T <input type="checkbox"/> Check if Austin TX officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
PAYMENT	(a) Amount Charged \$17.05	(b) Date of Charge 04/19/2023	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Zoom	(b) Payee address; City, State, Zip Code 55 Almaden Boulevard 6th Floor San Jose, CA 95113	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Online communication platform
	(c) <input type="checkbox"/> Check if travel outside of Texas Complete Schedule T <input type="checkbox"/> Check if Austin TX officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political 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 F4: Sch: 9/12 Rpt: 45/50		2 FILER NAME Ogg, Kim		3 Filer ID	
4 CREDIT CARD ISSUER		Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$119.40	(b) Date of Charge 03/01/2023	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name CANVA		(b) Payee address; City, State, Zip Code 268 Devonshire Street Surry Hills New South Wales NSW 2010 Australia	
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Fees		(b) Description Graphic design platform	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T		<input type="checkbox"/> Check if Austin, TX officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
PAYMENT		(a) Amount Charged \$12.78	(b) Date of Charge 03/14/2023	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Dropbox		(b) Payee address; City, State, Zip Code 333 Brannan Street San Francisco, CA 94107	
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Fees		(b) Description Online storage	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T		<input type="checkbox"/> Check if Austin, TX officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
PAYMENT		(a) Amount Charged \$17.05	(b) Date of Charge 03/19/2023	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Zoom		(b) Payee address; City, State, Zip Code 55 Almaden Boulevard 6th Floor San Jose, CA 95113	
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Fees		(b) Description Online communication platform	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T		<input type="checkbox"/> Check if Austin, TX officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political 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 F4: Sch: 10/12 Rpt: 46/50	2 FILER NAME Ogg, Kim		3 Filer ID
4 CREDIT CARD ISSUER	Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$4.24	(b) Date of Charge 03/20/2023	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name HP Inc	(b) Payee address; City, State, Zip Code 10300 Energy Drive Spring, TX 77389	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Printer ink
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought      Office held
PAYMENT	(a) Amount Charged \$2,505.75	(b) Date of Charge 01/27/2023	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Nation Builder	(b) Payee address; City, State, Zip Code 520 South Grand Ave, 2nd Floor Los Angeles, CA 90071	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Online platform
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought      Office held
PAYMENT	(a) Amount Charged \$12.78	(b) Date of Charge 01/14/2023	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Dropbox	(b) Payee address; City, State, Zip Code 333 Brannan Street San Francisco, CA 94107	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Online storage
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought      Office held

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 11/12 Rpt: 47/50		2 FILER NAME Ogg, Kim		3 Filer ID	
4 CREDIT CARD ISSUER		Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$4.24	(b) Date of Charge 01/15/2023	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name HP Inc		(b) Payee address; City, State, Zip Code 10300 Energy Drive Spring, TX 77389	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Printer ink	
		(c) <input type="checkbox"/> Check if travel outside of Texas Complete Schedule T		<input type="checkbox"/> Check if Austin, TX officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
PAYMENT		(a) Amount Charged \$15.98	(b) Date of Charge 01/20/2023	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Zoom		(b) Payee address; City, State, Zip Code 55 Almaden Boulevard 6th Floor San Jose, CA 95113	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Online communication platform	
		(c) <input type="checkbox"/> Check if travel outside of Texas Complete Schedule T		<input type="checkbox"/> Check if Austin, TX officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
PAYMENT		(a) Amount Charged \$10.61	(b) Date of Charge 01/21/2023	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name HP Inc		(b) Payee address; City, State, Zip Code 10300 Energy Drive Spring, TX 77389	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Printer ink	
		(c) <input type="checkbox"/> Check if travel outside of Texas Complete Schedule T		<input type="checkbox"/> Check if Austin, TX officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

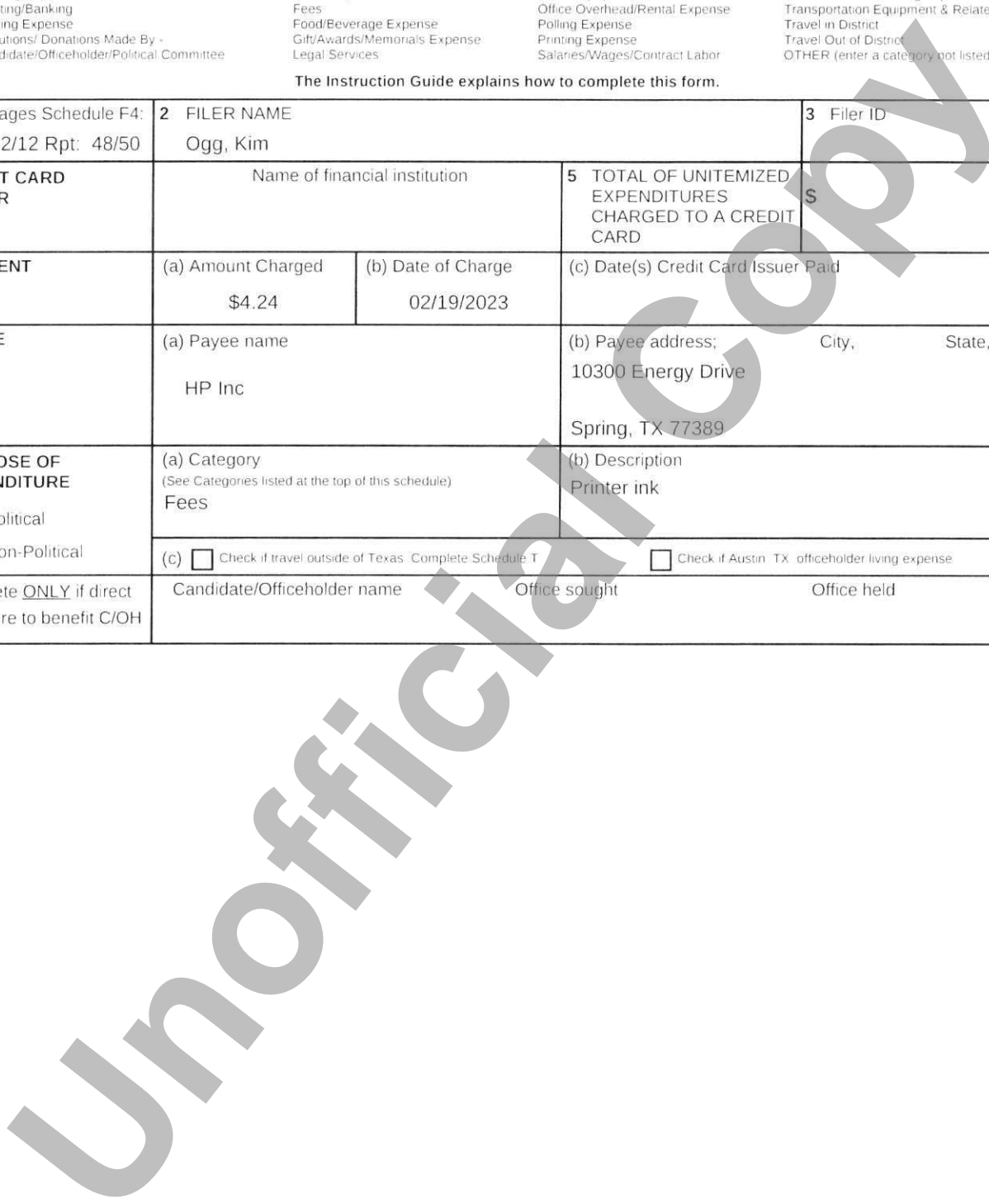
SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political 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 F4: Sch: 12/12 Rpt: 48/50	2 FILER NAME Ogg, Kim		3 Filer ID
4 CREDIT CARD ISSUER	Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD
6 PAYMENT	(a) Amount Charged \$4.24	(b) Date of Charge 02/19/2023	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name HP Inc	(b) Payee address; City, State, Zip Code 10300 Energy Drive Spring, TX 77389	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Printer ink
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T <input type="checkbox"/> Check if Austin, TX officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held



# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/2 Rpt: 49/50
2 FILER NAME Ogg, Kim		3 Filer ID
4 Date 06/30/2023	5 Name of person from whom amount is received Harris County Federal Credit Union	8 Amount (\$) \$11.24
6 Address of person from whom amount is received; City; State; Zip Code 1400 Franklin Houston, TX 77002		
7 Purpose for which amount is received Share Dividend		<input type="checkbox"/> Check if political contribution returned to filer
Date 05/31/2023	Name of person from whom amount is received Harris County Federal Credit Union	Amount (\$) \$10.33
Address of person from whom amount is received; City; State; Zip Code 1400 Franklin Houston, TX 77002		
Purpose for which amount is received Share Dividend		<input type="checkbox"/> Check if political contribution returned to filer
Date 04/30/2023	Name of person from whom amount is received Harris County Federal Credit Union	Amount (\$) \$9.99
Address of person from whom amount is received; City; State; Zip Code 1400 Franklin Houston, TX 77002		
Purpose for which amount is received Share Dividend		<input type="checkbox"/> Check if political contribution returned to filer
Date 03/31/2023	Name of person from whom amount is received Harris County Federal Credit Union	Amount (\$) \$10.27
Address of person from whom amount is received; City; State; Zip Code 1400 Franklin Houston, TX 77002		
Purpose for which amount is received Share Dividend		<input type="checkbox"/> Check if political contribution returned to filer
Date 02/28/2023	Name of person from whom amount is received Harris County Federal Credit Union	Amount (\$) \$9.36
Address of person from whom amount is received; City; State; Zip Code 1400 Franklin Houston, TX 77002		
Purpose for which amount is received Share Dividend		<input type="checkbox"/> Check if political contribution returned to filer

**INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER**

**SCHEDULE K**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:  
Sch: 2/2 Rpt: 50/50

2 FILER NAME  
Ogg, Kim

3 Filer ID

4 Date  
01/31/2023

5 Name of person from whom amount is received  
Harris County Federal Credit Union

8 Amount (\$) \$10.18

6 Address of person from whom amount is received; City; State; Zip Code  
1400 Franklin  
Houston, TX 77002

7 Purpose for which amount is received  
Share Dividend

Check if political contribution returned to filer

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