

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 47
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MS.	FIRST Adeola	MI 0
	NICKNAME Addie	LAST Heyliger	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX, APT / SUITE #, CITY, STATE, ZIP CODE 4222 Oak Forest Missouri City, TX 77459		
	5 CANDIDATE / OFFICEHOLDER PHONE AREA CODE PHONE NUMBER EXTENSION (832) 244-5861		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Soniah	MI J.
	NICKNAME Jones	LAST	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (Residence or Business) STREET ADDRESS (NO PO BOX PLEASE), APT / SUITE #, CITY, STATE, ZIP CODE 4714 Forest Home Dr., Missouri City, TX 77459			
8 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION (832) 721-1896			
9 REPORT TYPE <input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input 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)			
10 PERIOD COVERED Month Day Year THROUGH Month Day Year 01 / 01 / 21 THROUGH 03 / 20 / 21			
11 ELECTION ELECTION DATE: Month Day Year ELECTION TYPE: 5 / 1 / 21 <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special			
12 OFFICE OFFICE HELD (if any) Fort Bend ISD Position 6		13 OFFICE SOUGHT (if known) Fort Bend ISD Position 6	
14 NOTICE FROM POLITICAL COMMITTEE(S) 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"/> Additional Pages <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC		COMMITTEE TYPE	
		COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

OFFICE USE ONLY

Date Received

RECEIVED
 APR - 1 2021
 GDR

Date Hand-delivered or Date Postmarked

Receipt #	Amount \$
Date Processed	
Date Imaged	

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

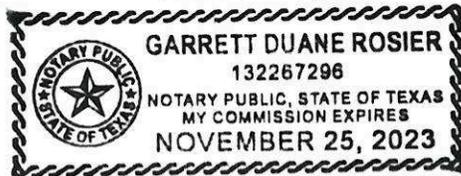
**FORM C/OH
COVER SHEET PG 2**

15 C/OH NAME <i>Adeola O. Heyliger</i>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 540.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 31,374.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 877.08
	4. TOTAL POLITICAL EXPENDITURES	\$ 10,263.50
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 21,955.24
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 SIGNATURE 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.

Adeola O. Heyliger
Signature of Candidate or Officeholder

Please complete either option below:



(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by *Adeola O. Heyliger* this the 1 day of April.

20 21, to certify which, witness my hand and seal of office.

Garrett Duane Rosier
Signature of officer administering oath

Garrett Duane Rosier
Printed name of officer administering oath

Executive Assistant to the DOT
Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <i>Adeola O. Heyliger</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>30,834.08</i>
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>9,386.42</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 40
2 FILER NAME Adeola Heyliger		3 Filer ID (Ethics Commission Filers)
4 Date 1/30/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shery Jones	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 1814 Timber Creek Dr. Mo. City TX 77459		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1/30/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian M. Middleton	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 1322 Southwest Fwy #1980 Houston, TX 77074		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/30/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byron Gautier	Amount of contribution (\$) \$1250.00
Contributor address; City; State; Zip Code 2606 Atlas Missouri City TX 77459		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/30/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James D. Rice	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 5402 Oban Terrance Lane Sugar Land TX 77479		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 40
2 FILER NAME Adeola Heyliger		3 Filer ID (Ethics Commission Filers)
4 Date 1/30/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Capital Assets Sustainable Energy	7 Amount of contribution (\$) \$ 200.00
6 Contributor address; City; State; Zip Code 9610 South Fitzgerald Mo. City TX 77459 Way		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1/30/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marcus Brewer	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code 1607 Buckwood Frenso TX 77565 Circle		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/30/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Joel C. Clouser	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code 3026 Pelican Cove Mo. City TX 77459		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/30/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Toni D. Spruell - Pierre	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code 730 Hawthorn Mo. City TX 7749 Place		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 42
2 FILER NAME Adeola Heyliger		3 Filer ID (Ethics Commission Filers)
4 Date 1/30/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jay Parekh	7 Amount of contribution (\$) \$ 100.00
6 Contributor address; City; State; Zip Code JayParekh@gmail.com		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1/30/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bridgett Roberson	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/1/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perdue, Brandon, Fielder, Collins & Mott	Amount of contribution (\$) \$ 1,000.00
Contributor address; City; State; Zip Code 1235 North Loop W. ste 600 Houston TX 77008		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/6/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Christus N. Powell Jr.	Amount of contribution (\$) \$ 500.00
Contributor address; City; State; Zip Code P.O. BOX 451726 Houston TX 77245		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <u>40</u>
2 FILER NAME <u>Adeola Heyliger</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>2/4/21</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <u>Oscar M. Telfair III PC</u>	7 Amount of contribution (\$) <u>\$300.00</u>
6 Contributor address; City; State; Zip Code <u>7011 Harwin Dr. ste 220 Houston TX 77036</u>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <u>2/4/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <u>Yolanda M. Humphrey</u>	Amount of contribution (\$) <u>\$500.00</u>
Contributor address; City; State; Zip Code <u>2803 Scottsdale Palm Dr. Mo. City TX 77459</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>2/2/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <u>Ron Reynolds Campaign</u>	Amount of contribution (\$) <u>\$1,000.00</u>
Contributor address; City; State; Zip Code <u>6140 NWY6 S. #233 Mo. City TX 77459</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>2/7/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <u>Portia Olden Poindexter</u>	Amount of contribution (\$) <u>\$200.00</u>
Contributor address; City; State; Zip Code <u>4123 Sundance Hill Lane SugarLand TX 77479</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 40
2 FILER NAME Adeola Heyliger		3 Filer ID (Ethics Commission Filers)
4 Date 1/26/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lina Sabouni	7 Amount of contribution (\$) \$1000.00
6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1/26/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yolanda Marshall	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/23/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brenda Corprew	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/30/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nicole Broussard-Smothers	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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2 FILER NAME Adeola Heyliger		3 Filer ID (Ethics Commission Filers)
4 Date 1/30/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kevin Daniels	7 Amount of contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1/30/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Geralynn Prince	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/28/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Angela Landry	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/27/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) James Prestage	Amount of contribution (\$) \$1000.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 42
2 FILER NAME Adeola Heyliger		3 Filer ID (Ethics Commission Filers)
4 Date 1/30/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Christopher Lewis	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1/30/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kiran Rajaya	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/30/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Karen Tillman	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/30/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maye Dolores Collins	Amount of contribution (\$) \$25.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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2 FILER NAME Adeola Heyliger		3 Filer ID (Ethics Commission Filers)
4 Date 1/30/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sherrita Dorsey	7 Amount of contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1/30/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zenithe Pierre	Amount of contribution (\$) \$19.08
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/30/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jaimi Canady	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/30/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Joelynn C. Kelly	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME Adeola Heyliger		3 Filer ID (Ethics Commission Filers)
4 Date 1/30/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ingeuneal Gray	7 Amount of contribution (\$) \$ 100.00
6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1/30/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pamiel J. Gaskin	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/31/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dewaynna Horn	Amount of contribution (\$) \$ 300.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/31/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Theresa DeBose	Amount of contribution (\$) \$ 500.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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2 FILER NAME Adeola Heyliger		3 Filer ID (Ethics Commission Filers)
4 Date 1/31/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cheryl Moultry	7 Amount of contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 1/31/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stephanie Bundage Juvane	Amount of contribution (\$) \$300.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/31/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gina Evans	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/31/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ferrel Bonner	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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2 FILER NAME Adeola Heyliger		3 Filer ID (Ethics Commission Filers)
4 Date 2/4/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ja Paula Kemp	7 Amount of contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/4/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heidi Obie	Amount of contribution (\$) \$150.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/4/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Quanda Gill	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/4/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Floyd M. Davis	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME Adeola Heyliger		3 Filer ID (Ethics Commission Filers)
4 Date 2/5/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chasta Martin	7 Amount of contribution (\$) \$ 150.00
6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/7/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Angelique Bartholomew	Amount of contribution (\$) \$ 150.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/7/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Margo Rainge	Amount of contribution (\$) \$ 20.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/8/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Millicent Sims	Amount of contribution (\$) \$ 25.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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2 FILER NAME Adeola Heyliger		3 Filer ID (Ethics Commission Filers)
4 Date 2/8/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Spurgeon Robinson	7 Amount of contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/9/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tera Nunn	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/8/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) James Davidson	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/8/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tia Manteca	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1 42
2 FILER NAME Adeola Heyliger		3 Filer ID (Ethics Commission Filers)
4 Date 2/22/28	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gabrielle Walton	7 Amount of contribution (\$) \$ 25.00
6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/22/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lynda B. Edwards	Amount of contribution (\$) \$ 25.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/22/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Adenika Heyliger	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/22/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Amadi Heyliger	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 42
2 FILER NAME Adeola Heyliger		3 Filer ID (Ethics Commission Filers)
4 Date 2/22/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nicole C West	7 Amount of contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/23/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garrett J. Walton	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/23/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Antrece L. Baggett	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/11/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Neidi Obie	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 42
2 FILER NAME Adeola Heyliger		3 Filer ID (Ethics Commission Filers)
4 Date 2/12/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kamala Turner	7 Amount of contribution (\$) \$ 25.00
6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/16/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gabrielle Walton	Amount of contribution (\$) \$ 50.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/16/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Terrence Smith	Amount of contribution (\$) \$ 1000.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1 42
2 FILER NAME Adeola Heyliger		3 Filer ID (Ethics Commission Filers)
4 Date 3/1/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tahlie Rochelle	7 Amount of contribution (\$) \$300.00
6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/15/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Earl M. Cummings	Amount of contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/9/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tongela A. Clark	Amount of contribution (\$) \$200.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/12/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sheryl Hudson	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <u>42</u>
2 FILER NAME <u>Adeola Heyliger</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>2/9/21</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Crystal Brown</u>	7 Amount of contribution (\$) <u>200.00</u>
6 Contributor address; City; State; Zip Code <u>Houston, TX</u>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <u>2/10/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>April Powell</u>	Amount of contribution (\$) <u>200.00</u>
Contributor address; City; State; Zip Code <u>Houston, TX</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>2/10/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Ivy Livingston</u>	Amount of contribution (\$) <u>50.00</u>
Contributor address; City; State; Zip Code <u>Missouri City, TX</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>2/11/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Edith Heyliger</u>	Amount of contribution (\$) <u>200.00</u>
Contributor address; City; State; Zip Code <u>Atlanta, GA</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: <u>42</u>
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2 FILER NAME <u>Adiola Heylige-</u>	3 Filer ID (Ethics Commission Filers)
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4 Date <u>2/12/21</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Monica Akompi</u>	7 Amount of contribution (\$) <u>75.00</u>
6 Contributor address; City; State; Zip Code <u>Sugarland, TX</u>		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
---	-------------------------------

Date <u>2/12/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Veronica Odum</u>	Amount of contribution (\$) <u>50.00</u>
Contributor address; City; State; Zip Code <u>Pearland, TX</u>		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
---	-----------------------------

Date <u>2/12/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Marcia BARNES</u>	Amount of contribution (\$) <u>50.00</u>
Contributor address; City; State; Zip Code <u>Pearland TX</u>		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
---	-----------------------------

Date <u>2/12/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Djuna Prater</u>	Amount of contribution (\$) <u>25.00</u>
Contributor address; City; State; Zip Code <u>Pearland TX</u>		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: *42*

2 FILER NAME *Adeola Heyuige*

3 Filer ID (Ethics Commission Filers)

4 Date
2/12/21

5 Full name of contributor out-of-state PAC (ID#: _____)
Doneboan Wright
6 Contributor address; City; State; Zip Code
Houston, TX

7 Amount of contribution (\$)
50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
2/11/21

Full name of contributor out-of-state PAC (ID#: _____)
Desiree Irby
Contributor address; City; State; Zip Code
Pearland TX

Amount of contribution (\$)
100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
2/12/21

Full name of contributor out-of-state PAC (ID#: _____)
Britney Gibson
Contributor address; City; State; Zip Code
Houston, TX

Amount of contribution (\$)
25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
2/12/21

Full name of contributor out-of-state PAC (ID#: _____)
Terinn Horton
Contributor address; City; State; Zip Code
Fresno, TX

Amount of contribution (\$)
50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: *42*

2 FILER NAME

Adeola Heyliger

3 Filer ID (Ethics Commission Filers)

4 Date

2/14/21

5 Full name of contributor

Charlene Young

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

150.00

6 Contributor address;

Houston TX

City;

State;

Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2/14/21

Full name of contributor

Mary Robbins

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

25.00

Contributor address;

Houston TX

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/14/21

Full name of contributor

Demetri Walker

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

25.00

Contributor address;

Houston TX

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/17/21

Full name of contributor

Mourhaf Saibani

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

6000.00

Contributor address;

Missouri City TX

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <u>42</u>
2 FILER NAME <u>Adoleola Kylice</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>2/18/21</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Eric McLenore</u>	7 Amount of contribution (\$) <u>150.00</u>
6 Contributor address; City; State; Zip Code <u>Houston TX</u>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <u>2/19/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Gabrielle Walton</u>	Amount of contribution (\$) <u>100.00</u>
Contributor address; City; State; Zip Code <u>Pearland TX</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>2/19/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Kimberly Slaughter</u>	Amount of contribution (\$) <u>200.00</u>
Contributor address; City; State; Zip Code <u>San Antonio TX</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>2/20/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>KATIE Harrington</u>	Amount of contribution (\$) <u>100.00</u>
Contributor address; City; State; Zip Code <u>Missouri City TX</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 4/2

2 FILER NAME

Adcole Heyliger

3 Filer ID (Ethics Commission Filers)

4 Date

2/21/21

5 Full name of contributor

Brenda Cooper

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

300.00

6 Contributor address;

City;

State;

Zip Code

Pearland TX

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2/22/21

Full name of contributor

Bryson West

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

50.00

Contributor address;

City;

State;

Zip Code

Pearland TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/22/21

Full name of contributor

Lisa Holmer

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

25.00

Contributor address;

City;

State;

Zip Code

Pearland TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/22/21

Full name of contributor

Donzell Bellow

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

50.00

Contributor address;

City;

State;

Zip Code

Pearland, TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <i>4/2</i>
2 FILER NAME <i>Adeola Hayliger</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2/22/21</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>William Rogers</i>	7 Amount of contribution (\$) <i>25.00</i>
6 Contributor address; City; State; Zip Code <i>Houston, TX</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>2/22/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Masha Shepherd</i>	Amount of contribution (\$) <i>100.00</i>
Contributor address; City; State; Zip Code <i>Pearland TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>2/22/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Nettie Jones</i>	Amount of contribution (\$) <i>300.00</i>
Contributor address; City; State; Zip Code <i>Houston TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>2/22/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Lauren Cain Williams</i>	Amount of contribution (\$) <i>50.00</i>
Contributor address; City; State; Zip Code <i>Houston TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <u>42</u>
2 FILER NAME <u>Adeola Hyeige</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>2/22/21</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Vanessa Carter</u>	7 Amount of contribution (\$) <u>400.00</u>
6 Contributor address; City; State; Zip Code <u>Richmond TX</u>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <u>2/22/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Doalisha Foster</u>	Amount of contribution (\$) <u>50.00</u>
Contributor address; City; State; Zip Code <u>Missouri City, TX</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>2/22/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Anthony Howard</u>	Amount of contribution (\$) <u>50.00</u>
Contributor address; City; State; Zip Code <u>Houston TX</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>2/22/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Sharrn Clouse</u>	Amount of contribution (\$) <u>100.00</u>
Contributor address; City; State; Zip Code <u>Dallas, TX</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <i>42</i>
2 FILER NAME <i>Adeola Keyige</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2/22/21</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Cyndra Fairfax</i>	7 Amount of contribution (\$) <i>500.00</i>
6 Contributor address; City; State; Zip Code <i>Houston, TX</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>2/22/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Amber Eldorado</i>	Amount of contribution (\$) <i>1000.00</i>
Contributor address; City; State; Zip Code <i>H Houston, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>2/22/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Robin Burgess</i>	Amount of contribution (\$) <i>200.00</i>
Contributor address; City; State; Zip Code <i>Plantard, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>2/22/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mike Johnson</i>	Amount of contribution (\$) <i>100.00</i>
Contributor address; City; State; Zip Code <i>Houston, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <u>42</u>
2 FILER NAME <u>Adeola Heyliger</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>2/23/21</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Andiea Sneed</u>	7 Amount of contribution (\$) <u>50.00</u>
6 Contributor address; City; State; Zip Code <u>Pearland TX</u>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <u>2/23/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Carol Taylor</u>	Amount of contribution (\$) <u>50.00</u>
Contributor address; City; State; Zip Code <u>Pearland TX</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>2/23/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>TBDC consultants - Teri DAN</u>	Amount of contribution (\$) <u>100.00</u>
Contributor address; City; State; Zip Code <u>Pearland TX</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>2/23/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Paula Harris</u>	Amount of contribution (\$) <u>150.00</u>
Contributor address; City; State; Zip Code <u>Houston TX</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <i>4/2</i>
2 FILER NAME <i>Adeola Heylige</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2/23/21</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Carla Lane</i>	7 Amount of contribution (\$) <i>100.00</i>
6 Contributor address; City; State; Zip Code <i>Houston, TX</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>2/23/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mohammad Aijaz</i>	Amount of contribution (\$) <i>25.00</i>
Contributor address; City; State; Zip Code <i>Houston, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>2/23/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Shawn Johnson</i>	Amount of contribution (\$) <i>100.00</i>
Contributor address; City; State; Zip Code <i>Houston, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>2/23/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Soelynn Kelly</i>	Amount of contribution (\$) <i>250.00</i>
Contributor address; City; State; Zip Code <i>Missouri City, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <i>4/2</i>
2 FILER NAME <i>Adeola Hylige</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2/23/21</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Letitia Plummer</i>	7 Amount of contribution (\$) <i>200.00</i>
6 Contributor address; City; State; Zip Code <i>Houston, TX</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>2/23/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Courtney Rose</i>	Amount of contribution (\$) <i>250.00</i>
Contributor address; City; State; Zip Code <i>Missouri City, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>2/23/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Angela Landry Walker</i>	Amount of contribution (\$) <i>250.00</i>
Contributor address; City; State; Zip Code <i>Missouri City</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>2/23/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jamie Beal</i>	Amount of contribution (\$) <i>200.00</i>
Contributor address; City; State; Zip Code <i>Houston, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <i>4/2</i>
2 FILER NAME <i>Adeola Hylige</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2/25/21</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jacqueline Harrison</i>	7 Amount of contribution (\$) <i>50.00</i>
6 Contributor address; City; State; Zip Code <i>Pearland, TX</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>2/25/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Husein Hadi</i>	Amount of contribution (\$) <i>250.00</i>
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>2/26/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Aris Bonner</i>	Amount of contribution (\$) <i>100.00</i>
Contributor address; City; State; Zip Code <i>Houston TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>2/26/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Byron Biley</i>	Amount of contribution (\$) <i>250.00</i>
Contributor address; City; State; Zip Code <i>Houston TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <u>4/2</u>
2 FILER NAME <u>Adeok Hyeign</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>2/27/21</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Theophilis Woodard</u> 6 Contributor address; City; State; Zip Code <u>Houston, TX</u>	7 Amount of contribution (\$) <u>100.00</u>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <u>2/28/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Diamond Prothro</u> Contributor address; City; State; Zip Code <u>Pearland, TX</u>	Amount of contribution (\$) <u>100.00</u>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>2/28/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Wesley Davi</u> Contributor address; City; State; Zip Code <u>Missouri City, TX</u>	Amount of contribution (\$) <u>100.00</u>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>2/28/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Rustom Anklesani</u> Contributor address; City; State; Zip Code <u>Missouri City</u>	Amount of contribution (\$) <u>100.00</u>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <u>42</u>
2 FILER NAME <u>Adeola Heyliger</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>2/28/21</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Margaret Williams</u>	7 Amount of contribution (\$) <u>100.00</u>
	6 Contributor address; City; State; Zip Code <u>Missouri City TX</u>	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <u>2/28/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Amanda Goodie</u>	Amount of contribution (\$) <u>100.00</u>
	Contributor address; City; State; Zip Code <u>Houston, TX</u>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>2/28/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Jennifer Barthol</u>	Amount of contribution (\$) <u>25.00</u>
	Contributor address; City; State; Zip Code <u>Houston, TX</u>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>2/28/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Terr Earls</u>	Amount of contribution (\$) <u>100.00</u>
	Contributor address; City; State; Zip Code <u>Portland, TX</u>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <u>4/2</u>
2 FILER NAME <u>Adelock Heywig</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>2/28/21</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>DAPHNE WILSON</u>	7 Amount of contribution (\$) <u>100.00</u>
6 Contributor address; City; State; Zip Code <u>Fort Lauderdale Florida</u>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <u>2/28/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>MAY SARNA</u>	Amount of contribution (\$) <u>75.00</u>
Contributor address; City; State; Zip Code <u>MISSOURI CITY, TX</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>2/28/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>KAREN ALLEN</u>	Amount of contribution (\$) <u>50.00</u>
Contributor address; City; State; Zip Code <u>PLANTLAND, TX</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>2/28/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>SHARNA DAVIDSON</u>	Amount of contribution (\$) <u>250.00</u>
Contributor address; City; State; Zip Code <u>MISSOURI CITY, TX</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <u>42</u>
2 FILER NAME <u>Adeola Heyliger</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>2/28/21</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Tammy Stansbury</u>	7 Amount of contribution (\$) <u>50.00</u>
6 Contributor address; City; State; Zip Code <u>Richmond, TX</u>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <u>2/28/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Denise Sanders</u>	Amount of contribution (\$) <u>100.00</u>
Contributor address; City; State; Zip Code <u>Houston, TX</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>2/28/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Ronique Bastre</u>	Amount of contribution (\$) <u>100.00</u>
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <u>2/28/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Jacqueline Legginston</u>	Amount of contribution (\$) <u>50.00</u>
Contributor address; City; State; Zip Code <u>Pearland TX</u>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <i>42</i>
2 FILER NAME <i>Adeleke Heyiger</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2/28/21</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Panella Senegale</i>	7 Amount of contribution (\$) <i>50.00</i>
6 Contributor address; City; State; Zip Code <i>Missouri City, TX</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>2/28/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Robin Walker</i>	Amount of contribution (\$) <i>50.00</i>
Contributor address; City; State; Zip Code <i>Missouri City, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/1/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Chalita Cyprian</i>	Amount of contribution (\$) <i>50.00</i>
Contributor address; City; State; Zip Code <i>Missouri city TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/1/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Gerald Clark</i>	Amount of contribution (\$) <i>500.00</i>
Contributor address; City; State; Zip Code <i>Charleston, WI</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <i>42</i>
2 FILER NAME <i>Adelok Hyuga</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/2/21</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Gaimie Breech</i>	7 Amount of contribution (\$) <i>25.00</i>
6 Contributor address; City; State; Zip Code <i>Pearland, TX</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <i>3/2/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Trea Singleton</i>	Amount of contribution (\$) <i>100.00</i>
Contributor address; City; State; Zip Code <i>Missouri City, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/4/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ferika Jackson</i>	Amount of contribution (\$) <i>200.00</i>
Contributor address; City; State; Zip Code <i>Pearland, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <i>3/5/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ryan Terabea</i>	Amount of contribution (\$) <i>100.00</i>
Contributor address; City; State; Zip Code <i>Houston, TX</i>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <i>42</i>
2 FILER NAME <i>Haleola Heyiger</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>3/5/21</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kia Carter</i>	7 Amount of contribution (\$) <i>25.00</i> <i>100.00</i>
6 Contributor address; City; State; Zip Code		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
---	-------------------------------

Date <i>3/5/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Netkon</i>	Amount of contribution (\$) <i>100.00</i>
Contributor address; City; State; Zip Code		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
---	-----------------------------

Date <i>3/6/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Charann Thompson</i>	Amount of contribution (\$) <i>50.00</i>
Contributor address; City; State; Zip Code <i>Houston TX</i>		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
---	-----------------------------

Date <i>3/6/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Andree Williams</i>	Amount of contribution (\$) <i>50.00</i>
Contributor address; City; State; Zip Code <i>Pearlane, TX</i>		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 4/2

2 FILER NAME

Adeola Hayiga

3 Filer ID (Ethics Commission Filers)

4 Date

3/7/21

5 Full name of contributor

Cedrick Smith

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

500.00

6 Contributor address;

City; State; Zip Code

Houston, TX

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/8/21

Full name of contributor

Portia Babineaux

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

25.00

Contributor address;

City; State; Zip Code

Dallas, TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/8/21

Full name of contributor

Sandra Tennessee

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

Pearland, TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/8/21

Full name of contributor

Cynthia Knox

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

Sugarland, TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 42

2 FILER NAME

Adeola Heyiger

3 Filer ID (Ethics Commission Filers)

4 Date

3/9/21

5 Full name of contributor

out-of-state PAC (ID#: _____)

Laurinda Pontaud

7 Amount of contribution (\$)

150.00

6 Contributor address;

City;

State;

Zip Code

Phoenix, AZ

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/11/21

Full name of contributor

out-of-state PAC (ID#: _____)

Diamond Potho

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

Pearland, TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/12/21

Full name of contributor

out-of-state PAC (ID#: _____)

Ferita Gentry

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

Missouri City, TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/18/21

Full name of contributor

out-of-state PAC (ID#: _____)

Dr. C. E. Imam Shabazz

Amount of contribution (\$)

150.00

Contributor address;

City;

State;

Zip Code

Houston, TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 42

2 FILER NAME

Adriola Heylige

3 Filer ID (Ethics Commission Filers)

4 Date

3/19/21

5 Full name of contributor

Tony Council

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

250.00

6 Contributor address;

City;

State;

Zip Code

Houston, TX

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/21/21

Full name of contributor

Carol Commins

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

150.00

Contributor address;

City;

State;

Zip Code

Sugar Land, TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/22/21

Full name of contributor

Earl Allen

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/22/21

Full name of contributor

Yanese Berg

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

250.00

Contributor address;

City;

State;

Zip Code

Missouri City, TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <u>2/2</u>
2 FILER NAME <u>Arleola Heyliger</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>3/22/16</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Danny Mum</u>	7 Amount of contribution (\$) <u>50.00</u>
6 Contributor address; City; State; Zip Code <u>Houston TX</u>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3	2 FILER NAME Adeola O. Heyliger	3 Filer ID (Ethics Commission Filers)
4 Date 1/19/21	5 Payee name Courtney Alexander	
6 Amount (\$) \$250.00	7 Payee address, City, State, Zip Code Seattle, Washington	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Website
	(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

Date 2/16/21	Payee name Kevin Rice	City, State, Zip Code
Amount (\$) \$250.00	Payee address, City, State, Zip Code Pearland TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description DJ - Campaign kickoff
	<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

Date 3/1/21	Payee name Texas Campaign	City, State, Zip Code
Amount (\$) \$300.00	Payee address, City, State, Zip Code Houston, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Consulting Fee
	<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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

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 3	2 FILER NAME Adicola Heylign	3 Filer ID (Ethics Commission Filers)
4 Date 3/3/21	5 Payee name Buller Wisconsin	
6 Amount (\$) \$1,000.00	7 Payee address, City, State, Zip Code Houston TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Advertisement
	(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
Date 3/08/21	Payee name M3 Graphics	
Amount (\$) 113.66	Payee address, City, State, Zip Code Houston, TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertisement Expense	Description Design Push Cards
	<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
Date 3/18/21	Payee name Saykumar Parekn	
Amount (\$) 1700.85	Payee address, City, State, Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertisement	Description Signs, magnets
	<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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages, Schedule F1: 3	2 FILER NAME Adeola Heyuig	3 Filer ID (Ethics Commission Filers)
4 Date 3/18/21	5 Payee name M3 Graphics	
6 Amount (\$) 2557.41	7 Payee address; City; State; Zip Code Houston TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Sign, Pushcarts
	(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
Date 3/22/21	Payee name Sprint to Sprint	
Amount (\$) 3,215.00	Payee address; City; State; Zip Code Houston TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Sign - Yard
	<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
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED