

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:

24

3 CANDIDATE /
OFFICEHOLDER
NAME

MS (MRS) / MR FIRST MI

Orjanel Kianna

NICKNAME LAST SUFFIX

Lewis

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

4111 North
Creekmont Dr. Fresno, TX 77545

Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE PHONE NUMBER EXTENSION

(713) 487-5427

6 CAMPAIGN
TREASURER
NAME

MS (MRS) / MR FIRST MI

Geralynn A

NICKNAME LAST SUFFIX

Prince-Semien

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

1007 Hannah
Falls Ln Fresno, TX 77545

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION

()

9 REPORT TYPE

☐ January 15 ☒ 30th day before election ☐ Runoff ☐ 15th day after campaign
treasurer appointment
(Officeholder Only)
☐ July 15 ☐ 8th day before election ☐ Exceeded Modified
Reporting Limit ☐ Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month Day Year Month Day Year
/ / THROUGH / /

11 ELECTION

ELECTION DATE

Month Day Year

5 / 7 / 22

ELECTION TYPE

Primary Runoff
General Special

☒ Other
Description

School Board

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

FBISD Pos 7

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.

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

15 C/OH NAME		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)	\$ 2,780.35
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 13,583.71
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 239.39
	4. TOTAL POLITICAL EXPENDITURES	\$ 8,861.39
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 5,968.01
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,500

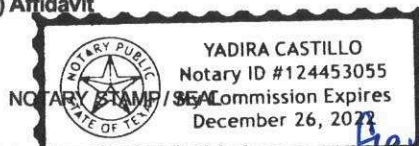
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

[Signature]

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



Sworn to and subscribed before me by Heralynn Alicia Prince this the 7th day of April

20 22, to certify which, witness my hand and seal of office.

[Signature]

Yadira Castillo

Notary

Signature of officer administering oath

Printed name of officer administering oath

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**

Orjanel Kianna Lewis, Esq.

20 Filer ID (Ethics Commission Filers)**21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE****SUBTOTAL
AMOUNT**

1. ✓	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 10,803.36
2. ✓	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 100.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ ∅
4. ✓	SCHEDULE E: LOANS	\$ 1,500
5. ✓	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 8,622.00
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ ∅
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ ∅
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ ∅
9. ✓	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 366.91
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ ∅
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ ∅
12.	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: 15
2 FILER NAME Orjanel Kianna Lewis		3 Filer ID (Ethics Commission Filers)
4 Date 1/31/22	5 Full name of contributor Phillip McEnany out-of-state PAC (ID#: 6 Contributor address; City; State; Zip Code Houston, TX	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Pharmacist		9 Employer (See Instructions) BP
Date 1/31/22	Full name of contributor Daniel Franklin Jr. Contributor address; City; State; Zip Code 6426 Conley St. Houston, TX 77021	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions)
Date 1/31/22	Full name of contributor Tamara Starks Contributor address; City; State; Zip Code 3722 Harvest Drive, Decatur, CA 90034	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 1/31/22	Full name of contributor Brandon Winchester Contributor address; City; State; Zip Code 13106 Tropicana Dr, Houston, TX 77041	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 15
2 FILER NAME Orjanel Kianna Lewis		3 Filer ID (Ethics Commission Filers)
4 Date 1/31/22	5 Full name of contributor Odell Pointer out-of-state PAC (ID#: 6 Contributor address; 14422 Windy Willow, Missouri City, TX City; State; Zip Code 77489	7 Amount of contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Self employed		9 Employer (See Instructions)
Date 1/31/22	Full name of contributor Anedra Coleman Contributor address; Laplace, LA City; State; Zip Code	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Parish Secretary		Employer (See Instructions) St. Charles Parish
Date 1/31/22	Full name of contributor Brandon Alexander Contributor address; New York, NY City; State; Zip Code	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)
Date 2/1/22	Full name of contributor Jocelyn Deik Adams Contributor address; Dallas, Texas City; State; Zip Code	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 15
2 FILER NAME Orjanel Kianna Lewis		3 Filer ID (Ethics Commission Filers)
4 Date 2/1/22	5 Full name of contributor Amanda Bolles Watson out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code Houston, Texas	7 Amount of contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) University of Houston
Date 2/2/22	Full name of contributor Linda Pointer Contributor address; City; State; Zip Code 14422 Windy Willow Ct. Missouri City, TX 77489	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/4/22	Full name of contributor Lori Williams Contributor address; City; State; Zip Code 20629 Pitchfork Dr. Riverside, CA 92507	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Portfolio Recovery Associates
Date 2/9/22	Full name of contributor Jade Noya Morales Contributor address; City; State; Zip Code Miami, FL	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 15
2 FILER NAME Orjanel Kianna Lewis		3 Filer ID (Ethics Commission Filers)
4 Date 2/10/22	5 Full name of contributor Diana Brown out-of-state PAC (ID#: 6 Contributor address; Houston, TX City; State; Zip Code	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Texas Childrens Hospital
Date 2/10/22	Full name of contributor Tiffany Harper out-of-state PAC (ID#: Contributor address; Chicago, IL City; State; Zip Code	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Business Management		Employer (See Instructions) Twitter
Date 2/10/22	Full name of contributor Janis Winey out-of-state PAC (ID#: Contributor address; Katy, Texas City; State; Zip Code	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Diagnostician		Employer (See Instructions) Katy ISD
Date 2/10/22	Full name of contributor Geraldynn Prince-Semien out-of-state PAC (ID#: Contributor address; 1007 Harman Falls Ln. Fresno, TX 77545 City; State; Zip Code	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Supply Chain Lead		Employer (See Instructions) Wood Group LLC.
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">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: 15
2 FILER NAME Orjanel Kianna Lewis		3 Filer ID (Ethics Commission Filers)
4 Date 2/10/22	5 Full name of contributor Zahra Syed out-of-state PAC (ID#: 6 Contributor address; Sugar Land, Texas City; State; Zip Code	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions)
Date 2/10/22	Full name of contributor Rosalind Lewis out-of-state PAC (ID#: Contributor address; Missouri City, TX City; State; Zip Code	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/10/22	Full name of contributor Elizabeth Hanks out-of-state PAC (ID#: Contributor address; Houston, Texas City; State; Zip Code	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 2/10/22	Full name of contributor Dylan Russell out-of-state PAC (ID#: Contributor address; Missouri City, TX City; State; Zip Code	Amount of contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hoover Slovacek
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">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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2 FILER NAME Orjanel Kianna Lewis		3 Filer ID (Ethics Commission Filers)
4 Date 2/10/22	5 Full name of contributor Jamila Carroll out-of-state PAC (ID#: 6 Contributor address; Houston, Texas City; State; Zip Code	7 Amount of contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) PBA Group
Date 2/10/22	Full name of contributor Rosanna Eugenio out-of-state PAC (ID#: Contributor address; New York, NY City; State; Zip Code	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 2/10/22	Full name of contributor Mehul Parikh out-of-state PAC (ID#: Contributor address; Sugar Land, TX City; State; Zip Code	Amount of contribution (\$) \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2/11/22	Full name of contributor Jennifer Weathersby Williams out-of-state PAC (ID#: Contributor address; Chicago, IL City; State; Zip Code	Amount of contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 15
2 FILER NAME Orjanel Kianna Lewis		3 Filer ID (Ethics Commission Filers)
4 Date 2/11/22	5 Full name of contributor Holly Arimo Njoku out-of-state PAC (ID#: 6 Contributor address; City; State; Zip Code Richmond, TX	7 Amount of contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Pharmacist		9 Employer (See Instructions) Ben Taub Hospital
Date 2/11/22	Full name of contributor Stephanie Johnson Contributor address; City; State; Zip Code Richmond, TX	Amount of contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Simmons Johnson Consulting
Date 2/11/22	Full name of contributor Stephanie Semper Contributor address; City; State; Zip Code Houston, TX	Amount of contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Licensed Counselor		Employer (See Instructions) City of Houston
Date 2/12/22	Full name of contributor James morales Contributor address; City; State; Zip Code Miami, FL	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 15
2 FILER NAME Orjanele Kianna Lewis		3 Filer ID (Ethics Commission Filers)
4 Date 2/14/22	5 Full name of contributor Barbara Vaughns out-of-state PAC (ID#: 6 Contributor address; 13706 Monarch Road City; Houston, TX State; TX Zip Code 77047	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Clerk		9 Employer (See Instructions) USPS
Date 2/14/22	Full name of contributor Marsha Fowler Contributor address; 13702 Monarch Road City; Houston, TX State; TX Zip Code 77047	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) USPS
Date 2/15/22	Full name of contributor Nicole Leonard Contributor address; City; Los Angeles, CA State; CA Zip Code	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 2/26/22	Full name of contributor Kelsey Folmer Contributor address; City; Fresno, TX State; TX Zip Code	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Marketing Director		Employer (See Instructions) Schlumberger
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

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2 FILER NAME Orjanel Kianna Lewis		3 Filer ID (Ethics Commission Filers)
4 Date 2/27/22	5 Full name of contributor Dereck Lenoir out-of-state PAC (ID#: 6 Contributor address; League City, Texas City; State; Zip Code	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 2/27/22	Full name of contributor Marcus Lewis Contributor address; 4111 N. Creekmont Dr. City; State; Zip Code Fresno, TX 77545	Amount of contribution (\$) \$105.74
Principal occupation / Job title (See Instructions) Pharacist		Employer (See Instructions)
Date 3/2/22	Full name of contributor Michael Brown Contributor address; 3630 Villa Glen City; State; Zip Code Houston, TX	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) College & career Counselor		Employer (See Instructions) Kipp
Date 3/2/22	Full name of contributor Chanel Fowler Contributor address; 14018 Santa Teresa Rd. City; State; Zip Code Houston, TX 77045	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) MD Anderson
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">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: 15
2 FILER NAME Orjanel Kianna Lewis		3 Filer ID (Ethics Commission Filers)
4 Date 3/4/22	5 Full name of contributor Dylan Russell out-of-state PAC (ID#: 6 Contributor address; City; State; Zip Code Missouri City, TX	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Hoover Slovacek
Date 3/4/22	Full name of contributor Tiffany and Bronson Crawford out-of-state PAC (ID#: Contributor address; City; State; Zip Code Tucson, Arizona	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Medical Doctor		Employer (See Instructions)
Date 3/7/22	Full name of contributor Srenya Elackatt out-of-state PAC (ID#: Contributor address; City; State; Zip Code Missouri City, TX	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/7/22	Full name of contributor Niah Spriggs out-of-state PAC (ID#: Contributor address; City; State; Zip Code Oklahoma City, OK	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME Djanel Kianna Lewis		3 Filer ID (Ethics Commission Filers)
4 Date 3/7/22	5 Full name of contributor Phillip Elackatt out-of-state PAC (ID#: 6 Contributor address; City; State; Zip Code HOUST MISSOURI CITY, TX	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/7/22	Full name of contributor Grady Prestage Contributor address; City; State; Zip Code Missouri City, TX	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Fort Bend County
Date 3/11/22	Full name of contributor Melissa Spriggs Contributor address; City; State; Zip Code Stafford, TX	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Alief ISD
Date 3/11/22	Full name of contributor Marilyn Lewis Contributor address; City; State; Zip Code 14005 Walksew St. Houston, TX 77047	Amount of contribution (\$) \$100.00
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: 12
2 FILER NAME Orjanel Kianna Lewis		3 Filer ID (Ethics Commission Filers)
4 Date 3/11/22	5 Full name of contributor out-of-state PAC (ID#: Michael E Jackson 6 Contributor address; City; State; Zip Code 5819 Hancock Houston TX 77004	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Safety Tech		9 Employer (See Instructions) Olin Corp
Date 3/11/22	Full name of contributor out-of-state PAC (ID#: Sadar Q Imam Contributor address; City; State; Zip Code 19 Saint Christopher Ct. Sugar Land, TX 77479	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Project manager		Employer (See Instructions)
Date 3/11/22	Full name of contributor out-of-state PAC (ID#: Birdie Kelley Contributor address; City; State; Zip Code Missouri City, Texas	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 3/11/22	Full name of contributor out-of-state PAC (ID#: Dylan Russell Contributor address; City; State; Zip Code Missouri City, Texas	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hoover Storage
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 15
2 FILER NAME Orjane Kianna Lewis		3 Filer ID (Ethics Commission Filers)
4 Date 3/11/22	5 Full name of contributor Taylor Pointer out-of-state PAC (ID#: 6 Contributor address; City; State; Zip Code Houston, TX	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/11/22	Full name of contributor Sumita Chowdhury-Chosen Contributor address; City; State; Zip Code 4607 Keresnow Ct. Sugar Land, TX 77479	Amount of contribution (\$) \$10 \$101.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 3/11/22	Full name of contributor Oscar Telfair III Contributor address; City; State; Zip Code 4210 Oak Forest Dr. Missouri City, TX 77459	Amount of contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 3/11/22	Full name of contributor Odell Pointer Contributor address; City; State; Zip Code Missouri City, TX	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME Orjanel Kianna Lewis		3 Filer ID (Ethics Commission Filers)
4 Date 3/12/22	5 Full name of contributor Bob Westbrook out-of-state PAC (ID#: _____) 6 Contributor address; El Paso, Texas City; State; Zip Code	7 Amount of contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/13/22	Full name of contributor Jason Dobrolecki out-of-state PAC (ID#: _____) Contributor address; Missouri City, Texas City; State; Zip Code	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 3/16/22	Full name of contributor Martha Franci Wayland out-of-state PAC (ID#: _____) Contributor address; Norfolk, Virginia City; State; Zip Code	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/22/22	Full name of contributor Tom Hanan out-of-state PAC (ID#: _____) Contributor address; Sugar Land, TX City; State; Zip Code	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">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: 15
2 FILER NAME Orjanel Kianna Lewis		3 Filer ID (Ethics Commission Filers)
4 Date 3/25	5 Full name of contributor David Mc Neal out-of-state PAC (ID#: 6 Contributor address; Houston, Texas City; State; Zip Code	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) McNeal Law Group
Date 3/28	Full name of contributor Sairah Ahmed Contributor address; 5412 Patrick Henry St City; State; Zip Code Bellaire TX 77401	Amount of contribution (\$) 96.62
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/4	Full name of contributor Andee Marksamer Contributor address; 23 Seaton Ct. City; State; Zip Code Sugar Land TX 77479	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/5	Full name of contributor Marie Milnes-Vasquez Contributor address; City; State; Zip Code	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Attorney		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.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2: <u>1</u>	
2 FILER NAME <u>Orjanet Kianna Lewis</u>				3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$ <u>Ø</u>	
5 Date <u>2/26/22</u>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Derek Hames</u>			8 Amount of Contribution \$ <u>100.00</u>	9 In-kind contribution description <u>Volunteer meeting</u>
7 Contributor address; City; State; Zip Code <u>4830 Summer Lakes Missouri City, TX</u>				Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <u>COO</u>				11 Employer (FOR NON-JUDICIAL) (See Instructions) <u>Edgewater Digital</u>	
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	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
		Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
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)			

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

LOANS

SCHEDULE E

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 E: 1
2 FILER NAME Orjanel Kianna Lewis		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0
5 Date of loan 11/28/22	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Orjanel Kianna Lewis	9 Loan Amount (\$) 1,500
6 Is lender a financial institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8 Lender address; City; State; Zip Code 4111 North Creekmont Fresno TX 77545	10 Interest rate 0
		11 Maturity date 0
12 Principal occupation / Job title (See Instructions) Attorney		13 Employer (See Instructions)
14 Description of Collateral none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)

Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial institution? <input type="checkbox"/> Y <input type="checkbox"/> N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral none		Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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
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: 3		2 FILER NAME Orjanel Kianna Lewis		3 Filer ID (Ethics Commission Filers)	
4 Date 3/9/2022		5 Payee name M3 Graphics			
6 Amount (\$) \$899.94		7 Payee address; City; State; Zip Code 11730 S Wilcrest Dr. Houston, TX 77099			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense Ad		(b) Description campaign push cards		
	(c) Check if travel outside of Texas. Complete Schedule T.		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 3/10/22		Payee name M3 Graphics			
Amount (\$) 386.90		Payee address; City; State; Zip Code 11730 S Wilcrest Dr. Houston, TX 77099			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Ad. Expense		Description Push cards		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/14/2022		Payee name Sugar's Restaurant			
Amount (\$) \$541.25		Payee address; City; State; Zip Code 3424 FM 1092 Suite 290 Missouri, city TX 77459			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Kickoff Event		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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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
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: 3		2 FILER NAME Orjannel Kianna Lewis		3 Filer ID (Ethics Commission Filers)	
4 Date 3/21/22		5 Payee name Jennifer Cantu			
6 Amount (\$) 474.00		7 Payee address; City; State; Zip Code Rosenburg, TX			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Wages/Contract labor		(b) Description Blockwalking		
	(c) Check if travel outside of Texas. Complete Schedule T.		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 3/23/22		Payee name M3 Graphics			
Amount (\$) 2,483.52		Payee address; City; State; Zip Code 11730 S Wilcrest Dr. Houston, TX 77099			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Ad. Expense		Description Signs		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4/1/22		Payee name Aviva Wholesale			
Amount (\$) 195.18		Payee address; City; State; Zip Code 10355 Harwin Dr. Houston, TX 77036			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other		Description Campaign shirts		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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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
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: 3		2 FILER NAME Orjanel Kianna Lewis		3 Filer ID (Ethics Commission Filers)	
4 Date 4/1/22		5 Payee name New City Printing			
6 Amount (\$) 265.00		7 Payee address; City; State; Zip Code 445 Murphy Rd. Stafford, TX 77477			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing expenses		(b) Description Shirt Printing		
	(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 4/5/22		Payee name M3 Graphics			
Amount (\$) 2,353.36		Payee address; City; State; Zip Code 11730 Skilerest Dr. Houston, TX 77099			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Ad. Expense		Description Signs / Push cards		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 4/5/22		Payee name UPrinting			
Amount (\$) 822.85		Payee address; City; State; Zip Code 800 Haskell Ave. Van Nuys, CA 91406			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Ad. Expense		Description Postcards		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

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 G: 1		2 FILER NAME Orjanei Kianna Lewis		3 Filer ID (Ethics Commission Filers)	
4 Date 2/4/22		5 Payee name Square Space			
6 Amount (\$) 116.91 Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 8 Clarkson St. New York, NY			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) other		(b) Description Website		
	(c) Check if travel outside of Texas. Complete Schedule T.		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		Payee name Koreha Brown			
Amount (\$) 250.00 Reimbursement from political contributions intended		Payee address; City; State; Zip Code Missouri City, Texas			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting expense		Description Consulting		
	Check if travel outside of Texas. Complete Schedule T.		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 (\$) Reimbursement from political contributions intended		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	Check if travel outside of Texas. Complete Schedule T.		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					

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