

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)	\$ 294.50
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 5352.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 8049.74
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 4738.90
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

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 of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20 _____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Christine Parker, and my date of birth is 4-18-74.
 My address is 4042 Buckeye Creek, Kingwood, TX 71339 Harris.
(street) (city) (state) (zip code) (country)
 Executed in Harris County, State of Texas, on the 23 day of April, 20 21.
(month) (year)

 Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME <i>Christine Parker</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>1920</i>
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>3137.50</i>
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ <i>0</i>
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ <i>0</i>
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>8049.74</i>
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ <i>750</i>
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>0</i>
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ <i>0</i>
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ <i>456.63</i>
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ <i>0</i>
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>0</i>
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ <i>0</i>

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: 2
2 FILER NAME Christine Parker		3 Filer ID (Ethics Commission Filers)
4 Date 4/10/21	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VIZI Lange-Caldwell 6 Contributor address; City; State; Zip Code 1656 Hamblen Rd Kingwood TX 11339	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 4/15/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim Buish Contributor address; City; State; Zip Code 8703 Rolling Rapids, Kingwood TX 11339	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) JLA
Date 4/16/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elson Robertson Contributor address; City; State; Zip Code 2413 Pine Bend Kingwood, TX 11339	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 4/18/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janie Branham Contributor address; City; State; Zip Code 18906 Hikers Trail Humble TX 11346	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Humble Christian School

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: 6
2 FILER NAME Christine Parker		3 Filer ID (Ethics Commission Filers)
4 Date 4/18/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Toby Grebe 6 Contributor address; City; State; Zip Code 1910 Riverlawn Kingwood TX 11339	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions) Senior Account Mgr.		9 Employer (See Instructions) SPI
Date 4/18/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gwendolyn Crawford Contributor address; City; State; Zip Code 21008 Valley Manor, Kingwood, TX 11339	Amount of contribution (\$) 20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 4/18/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eileen Booher Contributor address; City; State; Zip Code 4043 Buckeye Creek, Kingwood TX 11339	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Grant Manager		Employer (See Instructions) Lohester College
Date 4/18/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jason Parker Contributor address; City; State; Zip Code 4042 Buckeye Creek, Kingwood TX 11339	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions) United Airlines

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: 10
2 FILER NAME Christine Parker		3 Filer ID (Ethics Commission Filers)
4 Date 4/14/21	5 Full name of contributor Nancy Short Sleeve out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 20011 Cherry Oaks, Humble, TX 71346		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Logo Stuff
4 Date 4/16/21	5 Full name of contributor Janet Huberty out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 13303 Aquatic Humble TX 71346		
Principal occupation / Job title (See Instructions) Guest Teacher		Employer (See Instructions) Humble ISD
4 Date 4/19/21	5 Full name of contributor Gwendolyn Crawford out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 2608 Valley Manor Kingwood, TX 71349		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
4 Date 4/9/21	5 Full name of contributor Dorothy Alspaugh out-of-state PAC (ID#: _____)	7 Amount of contribution (\$) 200.00
6 Contributor address; City; State; Zip Code 21318 Atascocita Place Humble TX 71346		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Alspaugh Ace Hardware Woodlands

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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: 6
2 FILER NAME Christine Parker		3 Filer ID (Ethics Commission Filers)
4 Date 4/18/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mille Garrison	7 Amount of contribution (\$) 30.00
6 Contributor address; City; State; Zip Code 4007 Evergreen Village, Kingwood, TX 11345		
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions) Humble Area Assisatana Ministries
Date 4/18/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devon Alexander	Amount of contribution (\$) 30.00
Contributor address; City; State; Zip Code 2503 Strathford, Kingwood, TX 11345		
Principal occupation / Job title (See Instructions) Patient Advocacy		Employer (See Instructions) Kingwood Medical Center HOP
Date 4/18/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly Paul	Amount of contribution (\$) 30.00
Contributor address; City; State; Zip Code 2611 Ridge Pine, Kingwood, TX 11345		
Principal occupation / Job title (See Instructions) Member Relations		Employer (See Instructions) Clubs of Kingwood, ClubCorp
Date 4/18/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheri Huber	Amount of contribution (\$) 30.00
Contributor address; City; State; Zip Code 21705 E Wallis Dr. Porter TX 11365		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Greater East Montgomery County Chamber

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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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: 6
2 FILER NAME Christine Parker		3 Filer ID (Ethics Commission Filers)
4 Date 4/20/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corinn Price	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 3410 Redwood Lodge Kingwood TX 11379		
8 Principal occupation / Job title (See Instructions) Professional		9 Employer (See Instructions) Insperity
Date 3/25/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheri Huber	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 21764 E Wallis Dr Porter TX 77365		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Greater East Montgomery Chamber
Date 4/18/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mandy Stevens	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 1202 Chatsworth Sky Humble TX 77396		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Responsive Ed
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: <i>6</i>
2 FILER NAME <i>Christanne Parker</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>4/18/21</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Marty Corcoran</i>	7 Amount of contribution (\$) <i>30.00</i>
6 Contributor address; City; State; Zip Code <i>1715 Autumn Run Spring TX 11319</i>		
8 Principal occupation / Job title (See Instructions) <i>Retired</i>		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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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: # 7	
2 FILER NAME Christine Parker		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 3137.50	
5 Date 4/18/21	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nick Wilson	8 Amount of Contribution \$ 327.50	9 In-kind contribution description Clubhouse Rental
7 Contributor address; City; State; Zip Code 1311 Castle Cobwebway Kingwood TX 77339		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Retired		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date 4/18/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Theo Christman	Amount of Contribution \$ 170.00	In-kind contribution description Refreshments Food/Beverage
Contributor address; City; State; Zip Code 1414 Baron Grove Kingwood TX 77345		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Retired		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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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: 4 7	
2 FILER NAME Christine Parker		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 4/18/21	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheryl Austin	8 Amount of Contribution \$ 45.00	9 In-kind contribution description Refreshments Food Beverage
7 Contributor address; City; State; Zip Code 2718 N. Strathford Kingwood TX 77345		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Retired		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date 4/18/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julie Payne	Amount of Contribution \$ \$450.00	In-kind contribution description Food Beverage Refreshments Entertainment
Contributor address; City; State; Zip Code 5903 Vineyard Creek Kingwood TX 77345		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Retired		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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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>7</u>	
2 FILER NAME <u>Chris Parker</u>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <u>4/18/21</u>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Kathy Neal</u>	8 Amount of Contribution \$ <u>75</u>	9 In-kind contribution description <u>Refreshments Food Beverage</u>
7 Contributor address; City; State; Zip Code <u>4100 Oak Gardens Kingwood TX 77339</u>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <u>Secretary</u>		11 Employer (FOR NON-JUDICIAL)(See Instructions) <u>Shell</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)		16 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 <u>4/18/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Kelly Paul</u>	Amount of Contribution \$ <u>25</u>	In-kind contribution description <u>Food Beverage Refreshments</u>
Contributor address; City; State; Zip Code <u>2611 Ridge Pine Kingwood TX 77345</u>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <u>member relations</u>		Employer (FOR NON-JUDICIAL)(See Instructions) <u>Clubs of Kingwood Clubcorp</u>	
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)			

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: 4 7	
2 FILER NAME <i>Chris Parker</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
6 Date <i>4/18/21</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Devon Alexander</i>	8 Amount of Contribution \$ <i>170.00</i>	9 In-kind contribution description <i>Refreshments Food/Beverage</i>
7 Contributor address; City; State; Zip Code <i>2503 Strathford Kingwood TX 71345</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <i>Patient Advocate</i>		11 Employer (FOR NON-JUDICIAL)(See Instructions) <i>Kingwood Medical Center Inc</i>	
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 <i>4/19/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Eileen Booher</i>	Amount of Contribution \$ <i>250.00</i>	In-kind contribution description <i>Flowers Refreshments Food/Beverage</i>
Contributor address; City; State; Zip Code <i>4042 Beckeye Creek Kingwood TX 71339</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <i>Grants Administrator</i>		Employer (FOR NON-JUDICIAL)(See Instructions) <i>Lohester College</i>	
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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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>7</u>	
2 FILER NAME <u>Christine Parker</u>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <u>3/25/21</u>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Melanie Cheairs</u>	8 Amount of Contribution \$ <u>\$250</u>	9 In-kind contribution description <u>Refreshments Food/Beverage</u>
7 Contributor address; City; State; Zip Code <u>2010 Seven Maples Kingwood TX 71345</u>		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <u>Attorney</u>		11 Employer (FOR NON-JUDICIAL)(See Instructions) <u>LDrance-Thompson</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 <u>3/31/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Enca Johnston</u>	Amount of Contribution \$ <u>\$200</u>	In-kind contribution description <u>Refreshments Food/Beverage</u>
Contributor address; City; State; Zip Code <u>7911 Sleepy Rose Ct. Humble, TX 71390</u>		Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <u>Public relations</u>		Employer (FOR NON-JUDICIAL)(See Instructions) <u>In-kids</u>	
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)			

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 <i>Christine Parker</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>4/17/21</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Terri Baker</i>	8 Amount of Contribution \$ <i>\$75</i>	9 In-kind contribution description <i>Refreshments Food/Beverage</i>
7 Contributor address; City; State; Zip Code <i>14314 Summerwood Lakes Dr Houston TX 77044</i>		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <i>Retired</i>		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date <i>4/11/21</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mark Lhabum</i>	Amount of Contribution \$ <i>\$500</i>	In-kind contribution description <i>Video editing</i>
Contributor address; City; State; Zip Code <i>23445 Yaupon Hills Dr Portersville TX 77357</i>		Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <i>President</i>		Employer (FOR NON-JUDICIAL)(See Instructions) <i>Greater East Montgomery Chamber</i>	
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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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>7</u>	
2 FILER NAME <u>Christine Parker</u>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <u>4/1/21</u>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Jennifer Hendershot</u>	8 Amount of Contribution \$ <u>\$100</u>	9 In-kind contribution description <u>Refreshments Food/Beverage</u>
7 Contributor address; City; State; Zip Code <u>13902 Lake Michigan Houston TX 77044</u>		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <u>Account Executive</u>		11 Employer (FOR NON-JUDICIAL)(See Instructions) <u>American Diamond Logistics</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 <u>4/15/21</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Daniella Sumbera</u>	Amount of Contribution \$ <u>\$500</u>	In-kind contribution description <u>Food/Beverage Refreshments</u>
Contributor address; City; State; Zip Code <u>12906 Chatsworth Sky Humble TX 77040</u>		Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <u>Realtor</u>		Employer (FOR NON-JUDICIAL)(See Instructions) <u>Keller Williams</u>	
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)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor 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 | 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: 4	2 FILER NAME Christine Parker	3 Filer ID (Ethics Commission Filers)
4 Date 4-17-21	5 Payee name Lake Houston Sports and Recreation Foundation	
6 Amount (\$) 150.00	7 Payee address; City; State; Zip Code 10122 Rusty Anchor Humble TX 77346	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Hotel Sponsor
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Candidate / Officeholder name: _____ Office sought: _____ Office held: _____		
Date 3/30/21	Payee name Raise the money Little Rock AR	
Amount (\$) 2.70	Payee address; City; State; Zip Code P.O. Box 20466 Little Rock AR 72221	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Website fundraising Fees
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Candidate / Officeholder name: _____ Office sought: _____ Office held: _____		
Date 04/21/21	Payee name Raise the Money	
Amount (\$) 5.15	Payee address; City; State; Zip Code PO Box 20466 Little Rock AR 72221	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Website fundraising Fees
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
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 | 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: 4	2 FILER NAME Chris Parker	3 Filer ID (Ethics Commission Filers)
4 Date 4-10-21	5 Payee name Harris County Republican Party	
6 Amount (\$) 1000.00	7 Payee address; City; State; Zip Code 8588 Katy Freeway Houston TX 77024 Ste 445	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Mailer
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/11/21	Payee name Logo Stuff	
Amount (\$) 224.62	Payee address; City; State; Zip Code 20011 Cherry Oaks Humble TX 79346	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Balloons
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/10/21	Payee name Jessica Colón	
Amount (\$) 1750.00	Payee address; City; State; Zip Code 3405 Edloe Houston TX 77021	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description mailer
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> 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	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: 4	2 FILER NAME Christine Parker	3 Filer ID (Ethics Commission Filers)
4 Date 4-21-21	5 Payee name Forest Image	
6 Amount (\$) 4000.00	7 Payee address; City; State; Zip Code 2820 Chestnut Ridge Kingwood TX 71339	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Magazine Ad.
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4-21-21	Payee name Tribune Newspaper	
Amount (\$) 700.00	Payee address; City; State; Zip Code 1036 First St #E, Unit C Humble, TX 71338	
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Newspaper, e-blast, e-cal.
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4-21-21	Payee name Partnership Lake Houston	
Amount (\$) 50.00	Payee address; City; State; Zip Code 110 West Main Street Humble TX 71338	
8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description E-blast
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> 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	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: <u>4</u>	2 FILER NAME <u>Christine Parker</u>	3 Filer ID (Ethics Commission Filers)
4 Date <u>4/5/21</u>	5 Payee name <u>Community Impact</u>	
6 Amount (\$) <u>800</u>	7 Payee address; City; State; Zip Code <u>16225 Impact Way #1 Pflugerville, TX 78660</u>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Advertising</u>	(b) Description <u>Newspaper</u>
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <u>3/25/21</u>	Payee name <u>K+S</u>	
Amount (\$) <u>373.46</u>	Payee address; City; State; Zip Code <u>5736 ym 1900 Rd E Humble, TX 71346</u>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Advertising</u>	Description <u>Shirts</u>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <u>04/11/21</u>	Payee name <u>Minuteman Press</u>	
Amount (\$) <u>2593.81</u>	Payee address; City; State; Zip Code <u>1221 238 First Street E Humble, TX 71338</u>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Printing Expense</u>	Description <u>Signs</u>
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: 1	2 FILER NAME Christine Parker	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$ 750.00
5 Date 3/30/21	6 Payee name Pathway Data LLC	
7 Amount (\$) 750	8 Payee address; City; State; Zip Code 3311 Richmond Ave Ste 319 Houston, TX 77098	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description Data
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date	Payee name		
Amount (\$)	Payee address;		City; State; Zip Code
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political		
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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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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 | 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 G: <u>1</u>	2 FILER NAME <u>Christine Parker</u>	3 Filer ID (Ethics Commission Filers)
4 Date <u>4/10/21</u>	5 Payee name <u>Community Print and Copy</u>	
6 Amount (\$) <u>102.84</u> <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <u>2012 Chestnut Ridge Kingwood TX 11339</u>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Printing Expense</u>	(b) Description <u>Push Cards</u>
	<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 <u>4/12/21</u>	Payee name <u>VZ Marketing</u>	
Amount (\$) <u>323.99</u> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <u>5900 Bingle Houston TX 77092</u>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Printing Expense</u>	Description <u>Signs</u>
	<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 <u>4/4/21</u>	Payee name <u>Boosted by Light Trcks</u>	
Amount (\$) <u>149029.80</u> <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <u>app store</u>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>	Description <u>Graphics app</u>
	<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

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