

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:

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI
Garrett A.R.
NICKNAME LAST SUFFIX
Knox

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
4835 Patterson rd. Manvel, TX 77578

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION
(832) 922-8275

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
Amanda G.
NICKNAME LAST SUFFIX
Rossi

7 CAMPAIGN TREASURER ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
4835 Patterson rd. Manvel, TX 77578
(Residence or Business)

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(281) 642-5994

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
1 / 1 / 2025 THROUGH 4 / 3 / 2025

11 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year Primary Runoff Other Description
5 / 3 / 2025 General Special local
City Council

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Manvel City Council Place 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.

Additional Pages

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

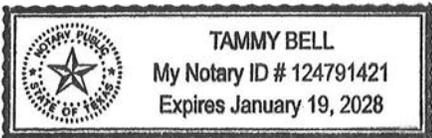
**FORM C/OH
COVER SHEET PG 2**

15 C/OH NAME Garrett Rossi Knox		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)	\$ 6,278.-
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,278.-
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 3,572.47
	4. TOTAL POLITICAL EXPENDITURES	\$ 3,572.47
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 56.74
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.

[Handwritten Signature]

Signature of Candidate or Officeholder



Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Garrett Knox this the 3 day of April, 2025, to certify which, witness my hand and seal of office.

[Signature] Tammy Bell City Secretary
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

Garrett Rossi Knox

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,070. ⁻
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 3,208. ⁻
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	\$ 3,397. ⁴⁷
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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 175. ⁻
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: **5**

2 FILER NAME

Garrett Rossi Knox

3 Filer ID (Ethics Commission Filers)

4 Date

1/2/25

5 Full name of contributor

April Daly

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

7 Amount of contribution (\$)

\$ 100.-

6 Contributor address; City; State; Zip Code

[REDACTED]

8 Principal occupation / Job title (See Instructions)

RPLS

9 Employer (See Instructions)

Overland Surveyors

Date

1/12/25

Full name of contributor

John Nessen-thaler

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

Amount of contribution (\$)

\$ 200.-

Contributor address; City; State; Zip Code

[REDACTED]

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

Date

1/11/25

Full name of contributor

Christy Simmons

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

Amount of contribution (\$)

\$ 75.-

Contributor address; City; State; Zip Code

[REDACTED]

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

Date

1/17/25

Full name of contributor

Garrett Rossi Knox

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

Amount of contribution (\$)

\$ 700.-

Contributor address; City; State; Zip Code

4835 Patterson rd Manvel TX 77578

Principal occupation / Job title (See Instructions)

Park manager

Employer (See Instructions)

Rossi Properties LLC.

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:

2 FILER NAME

Garrett Rossi Knox

3 Filer ID (Ethics Commission Filers)

4 Date

1/23/25

5 Full name of contributor

Christopher Halbahn

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

7 Amount of contribution (\$)

\$100.-

6 Contributor address;

City;

State;

Zip Code

8 Principal occupation / Job title (See Instructions)

Attorney

9 Employer (See Instructions)

Hoover Slovacek

Date

3/30/25

Full name of contributor

Muffet Seddon

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

Amount of contribution (\$)

\$100.-

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

Date

1/11/25

Full name of contributor

Michelle Hilborn

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

Amount of contribution (\$)

\$845.-

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Pharmaceutical Sales Rep

Employer (See Instructions)

Elanco Animal Health

Date

1/11/25

Full name of contributor

Heather Davis

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

Amount of contribution (\$)

\$190.-

Contributor address;

City;

State;

Zip Code

Principal occupation / Job title (See Instructions)

Unemployed

Employer (See Instructions)

unemployed

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:
2 FILER NAME <i>Garrett Rossi / Knox</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>1/11/25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Adrian Hernandez</i>	7 Amount of contribution (\$) <i>\$80.-</i>
6 Contributor address; City; State; Zip Code [REDACTED]		
8 Principal occupation / Job title (See Instructions) <i>CEO</i>		9 Employer (See Instructions) <i>Keep Pearland Beautiful</i>
Date <i>1/11/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Robin Garyard</i>	Amount of contribution (\$) <i>\$75.-</i>
Contributor address; City; State; Zip Code [REDACTED]		
Principal occupation / Job title (See Instructions) <i>owner</i>		Employer (See Instructions) <i>Robin's Full Service Salon</i>
Date <i>4/1/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Amanda Rossi</i>	Amount of contribution (\$) <i>\$190.-</i>
Contributor address; City; State; Zip Code [REDACTED]		
Principal occupation / Job title (See Instructions) <i>owner</i>		Employer (See Instructions) <i>Rossi Properties LLC.</i>
Date <i>1/11/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Margaret Cotter</i>	Amount of contribution (\$) <i>\$100.-</i>
Contributor address; City; State; Zip Code [REDACTED]		
Principal occupation / Job title (See Instructions) <i>unemployed</i>		Employer (See Instructions) <i>unemployed</i>
<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

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 FILER NAME <i>Garrett Rossi Knox</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>4/2/25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Erich Efeldt</i>	7 Amount of contribution (\$) <i>\$40.-</i>
6 Contributor address; City; State; Zip Code [REDACTED]		

8 Principal occupation / Job title (See Instructions) <i>Furniture Maker</i>	9 Employer (See Instructions) <i>Timber Fire Studio</i>
---	--

Date <i>4/2/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Tammie Laird</i>	Amount of contribution (\$) <i>\$25.-</i>
Contributor address; City; State; Zip Code [REDACTED]		

Principal occupation / Job title (See Instructions) <i>Owner</i>	Employer (See Instructions) <i>Nightlights by Tammie & Elora Laird Art</i>
---	---

Date <i>1/11/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Arianna Padilla</i>	Amount of contribution (\$) <i>\$30.-</i>
Contributor address; City; State; Zip Code [REDACTED]		

Principal occupation / Job title (See Instructions) <i>unemployed</i>	Employer (See Instructions) <i>unemployed</i>
--	--

Date <i>1/11/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kris Durrett</i>	Amount of contribution (\$) <i>\$100.-</i>
Contributor address; City; State; Zip Code [REDACTED]		

Principal occupation / Job title (See Instructions) <i>owner</i>	Employer (See Instructions) <i>Durrett Poolscapes</i>
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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:

2 FILER NAME *Garrett Rossi Knox* 3 Filer ID (Ethics Commission Filers)

4 Date *1/11/25* 5 Full name of contributor out-of-state PAC (ID#: _____) *Tanner Hales* 7 Amount of contribution (\$) *\$ 20.-*
 6 Contributor address; City; State; Zip Code

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

Date *1/11/25* Full name of contributor out-of-state PAC (ID#: _____) *Lonnie Grohman* Amount of contribution (\$) *\$ 100.-*
 Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions) *Retired* Employer (See Instructions) *Retired*

Date Full name of contributor out-of-state PAC (ID#: _____) Amount of contribution (\$)
 Contributor address; City; State; Zip Code

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

Date Full name of contributor out-of-state PAC (ID#: _____) Amount of contribution (\$)
 Contributor address; City; State; Zip Code

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.

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: 8
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2 FILER NAME Garrett Knox	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS	\$ 3,208.-
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5 Date	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caiden Anderson	8 Amount of Contribution \$ \$348.-	9 In-kind contribution description Donated website creation & design
	7 Contributor address; City; State; Zip Code [REDACTED]	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) owner	11 Employer (FOR NON-JUDICIAL) (See Instructions) Anderson Design
---	---

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 1/11/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacob Pickering	Amount of Contribution \$ \$400.-	In-kind contribution description Played music & sang at event for 2 hours
	Contributor address; City; State; Zip Code [REDACTED]	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) owner	Employer (FOR NON-JUDICIAL) (See Instructions) Jacob Pickering music
--	--

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:

2 FILER NAME **Garrett Rossi Knox** 3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$

5 Date 11/6/25	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J. J. Kowalik	8 Amount of Contribution \$ \$40.-	9 In-kind contribution description Donated Infantry token to Auction event
7 Contributor address; City; State; Zip Code [REDACTED]		<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) **Retired**

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 11/10/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heather Davis	Amount of Contribution \$ \$65.-	In-kind contribution description Donated a basket to Auction Event
Contributor address; City; State; Zip Code [REDACTED]		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) **unemployed** Employer (FOR NON-JUDICIAL) (See Instructions) **unemployed**

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:

2 FILER NAME **Garrett Rossi Knox** 3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$

5 Date 1/11/25	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Betsy Kindred	8 Amount of Contribution \$ \$35	9 In-kind contribution description Donated Carrot cake to auction event
7 Contributor address; City; State; Zip Code [REDACTED]		<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) **Retired**

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 1/10/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Lands	Amount of Contribution \$ \$1,410.-	In-kind contribution description Donated antiques to auction event
Contributor address; City; State; Zip Code [REDACTED]		<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) **Retired**

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:

2 FILER NAME **Garrett Rossi Knox** 3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$

5 Date 1/11/25	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dan Davis	8 Amount of Contribution \$ \$35.-	9 In-kind contribution description Donated map to Auction event
7 Contributor address; City; State; Zip Code [REDACTED]		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) **Engagement & Delivery Manager** 11 Employer (FOR NON-JUDICIAL) (See Instructions) **Irth**

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 1/5/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike Fulton	Amount of Contribution \$ \$75.-	In-kind contribution description Donated baskets to Auction event
Contributor address; City; State; Zip Code [REDACTED]		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) **Constable Mike Fulton** Employer (FOR NON-JUDICIAL) (See Instructions) **Brazoria County Constable Pct. 1**

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:	
2 FILER NAME <i>Garrett Rossi Knox</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>1/10/25</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kailee Dodd</i>	8 Amount of Contribution \$ <i>\$125.-</i>	9 In-kind contribution description <i>Donated basket to auction event</i>
7 Contributor address; City; State; Zip Code [REDACTED]		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <i>Server</i>		11 Employer (FOR NON-JUDICIAL) (See Instructions) <i>Via 313</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>1/10/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Amanda G. Rossi</i>	Amount of Contribution \$ <i>\$125.-</i>	In-kind contribution description <i>Donated painting to Auction Event</i>
Contributor address; City; State; Zip Code [REDACTED]		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation (FOR NON-JUDICIAL) (See Instructions) <i>Owner</i>		Employer (FOR NON-JUDICIAL) (See Instructions) <i>Rossi Properties LLC.</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)			

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:	
2 FILER NAME <i>Garrett Rossi KNOX</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>1/10/25</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Celicia Martin</i>	8 Amount of Contribution \$ <i>\$150.-</i>	9 In-kind contribution description <i>Donated Personal Training course to Auction event</i>
7 Contributor address; City; State; Zip Code [REDACTED]		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <i>Personal Trainer</i>		11 Employer (FOR NON-JUDICIAL) (See Instructions) <i>Self-employed</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>1/10/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Christopher Anderson</i>	Amount of Contribution \$ <i>\$115.-</i>	In-kind contribution description <i>Donated cutting board to Auction event.</i>
Contributor address; City; State; Zip Code [REDACTED]		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <i>Owner</i>		Employer (FOR NON-JUDICIAL) (See Instructions) <i>Salt water & Saw Dust woodworking</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)			

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:	
2 FILER NAME <i>Carrett Rossi Knox</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>1/10/25</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Sarah Booth</i>	8 Amount of Contribution \$ <i>\$75.-</i>	9 In-kind contribution description <i>Donated Basket to Auction Event</i>
7 Contributor address; City; State; Zip Code [REDACTED]		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <i>nurse</i>		11 Employer (FOR NON-JUDICIAL) (See Instructions) <i>Houston Hospice</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>1/11/25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Karrie Hurd</i>	Amount of Contribution \$ <i>\$70.-</i>	In-kind contribution description <i>Donated Basket to Auction Event</i>
Contributor address; City; State; Zip Code [REDACTED]		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <i>owner</i>		Employer (FOR NON-JUDICIAL) (See Instructions) <i>Crafted with Luv LLC</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) _____			

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:
2 FILER NAME <i>Garrett Rossi Knox</i>	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS	\$

5 Date <i>1/10/25</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Garrett Rossi Knox</i>	8 Amount of Contribution \$ <i>\$40.-</i>	9 In-kind contribution description <i>Donated Book to Auction Event</i>
7 Contributor address; City; State; Zip Code [REDACTED]		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <i>Park Manager</i>	11 Employer (FOR NON-JUDICIAL) (See Instructions) <i>Rossi Properties LLC</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	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		<input type="checkbox"/> 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)			

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: 3	2 FILER NAME Garrett Knox	3 Filer ID (Ethics Commission Filers)
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4 Date 1-9-25	5 Payee name All Water Tackle
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6 Amount (\$) \$568.31	7 Payee address; 6756 masters rd, Manvel, TX 77578	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Political/Campaign Shirts
	(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
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Date 1-21-25	Payee name Paypal
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Amount (\$) \$17.30	Payee address; 2211 N First St, San Jose, CA 95131	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description app usage fees
	<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
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Date 1-27-25	Payee name First Liberty Bank
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Amount (\$) \$11.00	Payee address; 20102 Morris Ave Manvel, TX 77578	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description ATM/Acct Fees
	<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
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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 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:	2 FILER NAME Garrett Knox	3 Filer ID (Ethics Commission Filers)
4 Date 2/25/25	5 Payee name Mammoth Marketing Group	
6 Amount (\$) \$1,158.⁶⁸	7 Payee address; City; State; Zip Code 4500 Bissonnet Suite 370 Bellaire, TX 77401	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description 2500 Pushcards & Door hangers & Design labor.
	(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 2/27/25	Payee name Honores Cajun Cafe	
Amount (\$) \$192.³⁷	Payee address; City; State; Zip Code 19430 HW 6 Manvel, TX 77578	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description appetizers for event guests
	<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 3/7/25	Payee name Sprouts Farmers Market	
Amount (\$) \$100.-	Payee address; City; State; Zip Code 2718 Old Chocolate Bayou rd. Pearland, Tx 77584	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description snacks & drinks for event
	<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 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:	2 FILER NAME <i>Garrett Knox</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>1-11-25</i>	5 Payee name <i>Party Kids America</i>	
6 Amount (\$) <i>\$254.39</i>	7 Payee address; City; State; Zip Code <i>11601 Shadow Creek Pkwy Suite 111 Pearland, TX 77584</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>event Expense</i>	(b) Description <i>chairs + tables for campaign Kickoff</i>
	(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
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Date <i>1-17-25</i>	Payee name <i>Texas GOP Store</i>
Amount (\$) <i>\$696.58</i>	Payee address; City; State; Zip Code <i>20230 Kings Camp Dr. Katy, TX 77450</i>

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>20 more 4x4 Political Signs</i>
	<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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Date <i>3-26-25</i>	Payee name <i>Texas GOP STORE</i>
Amount (\$) <i>\$498.84</i>	Payee address; City; State; Zip Code <i>20230 Kings Camp Dr. Katy, TX 77450</i>

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>12 more 4x4 Political Signs</i>
	<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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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: 1	2 FILER NAME Garrett Knox	3 Filer ID (Ethics Commission Filers)
4 Date 3/7/25	5 Payee name The Alvin Sun & Advertiser Newspapers	
6 Amount (\$) \$175.-	7 Payee address; City; State; Zip Code 570 Dula St. Alvin, TX 77511	
<input checked="" type="checkbox"/> Reimbursement from political contributions intended		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Political Ad in a magazine
	<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	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
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
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
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

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