FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00083815 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Leads PAC Date Received **ELECTRONICALLY FILED** 01/15/2020 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 279 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78767 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Jason NAME NICKNAME LAST **SUFFIX** Cordoba STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 85 Oak Dr. Ste. 102 STREET **ADDRESS** (Residence or Business) Lake Jackson, TX 77566 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 85 Oak Dr. Ste. 102 MAILING **ADDRESS** Lake Jackson, TX 77566 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (979) 297-2854 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2019 12/31/2019 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year χ Primary Runoff Other 03/03/2020 General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

| 12 COMMITTEE NAME | | | | 13 | Filer ID | (Ethics Commission Filers) |
|---|--|--------------------------|--|--------------------|-----------------|--|
| Texas Leads PAC | | | | (| 00083815 | |
| 14 COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | A. Supported | Dennis Bonnen St | ate Representa | itive | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | | |
| | Measures (Describe by date and location of election and nature of issue.) | A. Supported B. Opposed | | | | |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | | | |
| 15 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED PLEDGES, LOANS, check here if this report | OR GUARANTEES | S OF LOANS) ` | | \$ | 0.00 |
| | 2. TOTAL POLITICA (OTHER THAN PLE | | | F LOANS) | \$ | 105,000.00 |
| EXPENDITURE TOTALS | 3. TOTAL POLITICAL E | EXPENDITURES (| OF \$100 OR LESS, U | JNLESS ITEMIZI | ED \$ | 347.69 |
| | 4. TOTAL POLITICA | L EXPENDITUR | ES | | \$ | 111,378.80 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL (OF THE REPORTIN | | MAINTAINED AS O | F THE LAST DA | Y \$ | 2,996,243.90 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL A LAST DAY OF THE | | | ANS AS OF THE | \$ | 0.00 |
| 16 AFFIDAVIT | | true | ear, or affirm, under and correct and incl er Title 15, Election | ludes all informat | y, that the a | accompanying report is d to be reported by me |
| | | | | Jason Cor | doha | |
| | | | Siç | gnature of Campa | | ırer |
| AFFIX NOTARY | / STAMP / SEAL ABOVE | | | | | |
| Sworn to and subscribed | d before me, by the said | | | , this t | he | day |
| | _, 20, to certify v | | | | | |
| Signature of officer ac | dministering oath | Printed name of o | fficer administering o | oath | Title of office | cer administering oath |

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

| | | | 3 of 27 |
|---|--|-----------------------------|----------------------------|
| 17 COMMITT | EE NAME eads PAC | 18 Filer ID 00083815 | (Ethics Commission Filers) |
| 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT | |
| 1. | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ |
| 2. | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ |
| 3. | SCHEDULE B: PLEDGED CONTRIBUTIONS | | \$ |
| 4. X | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION | PR | \$ 105,000.00 |
| 5. | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION | ATION OR | \$ |
| 6. | SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG | ANIZATION | \$ |
| 7. | SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | | \$ |
| 8. | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (| ORGANIZATION | \$ |
| 9. | SCHEDULE E: LOANS | | \$ |
| 10. X | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | S | \$ 111,378.80 |
| 11. | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ |
| 12. | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION | ONS | \$ |
| 13. | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ |
| 14. | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | ONS | \$ |
| 15. X | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER | RETURNED | \$ 475.20 |
| | | | |
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MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

| The Instruc | tion Guide explains how to complete this form. | 1 Total pages Schedule C1: Sch: 1/1 Rpt: 4/27 |
|--------------|---|--|
| 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| Texas Leads | PAC | 00083815 |
| 4 Date | 5 Corporation / Labor Organization name | 7 Amount of contribution (\$) |
| 11/19/2019 | Altria Client Services LLC | \$10,000.00 |
| | 6 Corporation / Labor Organization address; City; State; Zip Code | |
| | Richmond, VA 23285 | |
| Date | Corporation / Labor Organization name | Amount of contribution (\$) |
| 08/21/2019 | Enterprise Products Operating LLC | \$50,000.00 |
| | Corporation / Labor Organization address; City; State; Zip Code | |
| | Houston, TX 77210 | |
| Date | Corporation / Labor Organization name | Amount of contribution (\$) |
| 10/09/2019 | IGT Global Solutions | \$25,000.00 |
| | Corporation / Labor Organization address; City; State; Zip Code | |
| | Reno, NV 89521 | |
| Date | Corporation / Labor Organization name | Amount of contribution (\$) |
| 09/24/2019 | Mustang Machinery Company | \$10,000.00 |
| | Corporation / Labor Organization address; City; State; Zip Code | |
| | Houston, TX 77251 | |
| Date | Corporation / Labor Organization name | Amount of contribution (\$) |
| 07/17/2019 | TxOGA Insurance Agency Inc | \$10,000.00 |
| | Corporation / Labor Organization address; City; State; Zip Code | |
| | Austin, TX 78701 | |

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

| Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|---|--|
| 1 Total pages Schedule F1: | |
| Sch: 1/22 Rpt: 5/27 | Texas Leads PAC 00083815 |
| 4 Date | 5 Payee name |
| 08/28/2019 | ADP |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$2,350.34 | 6500 River PI Blvd Bldg 7 Ste 150 |
| X Expenditure from corporate funds | Austin, TX 78730 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | PAC payroll taxes |
| | |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 08/28/2019 | ADP |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$3,132.72 | 6500 River Pl Blvd Bldg 7 Ste 150 |
| Expenditure from | |
| corporate funds | Austin, TX 78730 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor |
| | PAC payroll taxes |
| | |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 09/06/2019 | ADP |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$117.97 | 6500 River Pl Blvd Bldg 7 Ste 150 |
| Evponditure from | |
| X Expenditure from corporate funds | Austin, TX 78730 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense PAC payroll fees |
| | [2-3/-3/-3/-3/-3/-3/-3/-3/-3/-3/-3/-3/-3/- |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | 1 |
| | |
| | |
| <u> </u> | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | Gift/Awards/Memorials Expense Printing Expense 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: | <u> </u> |
| Sch: 2/22 Rpt: 6/27 | Texas Leads PAC 00083815 |
| • | <u></u> |
| 4 Date | 5 Payee name |
| 10/01/2019 | ADP |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$2,148.64 | 6500 River PI Blvd Bldg 7 Ste 150 |
| Evnenditure from | |
| X Expenditure from corporate funds | Austin, TX 78730 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. |
| EAFENDITUKE | Check if Austin, TX, officeholder living expense |
| | PAC payroll taxes |
| | |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| ехрениците то репент С/О | 1 |
| Date | Payee name |
| 10/01/2019 | ADP |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$3,625.42 | 6500 River Pl Blvd Bldg 7 Ste 150 |
| , | , and the second se |
| Expenditure from corporate funds | Austin, TX 78730 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor |
| LAI LINDITORE | Check if Austin, TX, officeholder living expense |
| | PAC payroll taxes |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| 3.,50 | |
| Date | Payee name |
| 10/11/2019 | ADP |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$121.32 | 6500 River PI Blvd Bldg 7 Ste 150 |
| | |
| X Expenditure from corporate funds | Austin, TX 78730 |
| PURPOSE | |
| OF | (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | PAC payroll fees |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | 1 |
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| | this Commission |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Cr Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 3/22 Rpt: 7/27 | Texas Leads PAC 00083815 |
| 4 Date | 5 Payee name |
| 10/25/2019 | ADP |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$26.65 | 6500 River PI Blvd Bldg 7 Ste 150 |
| | |
| X Expenditure from corporate funds | Austin, TX 78730 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITORE | Check if Austin, TX, officeholder living expense |
| | PAC payroll fees |
| | |
| Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 10/31/2019 | ADP |
| Δ ma a (Φ) | |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$2,121.34 | 6500 River Pl Blvd Bldg 7 Ste 150 |
| | |
| X Expenditure from corporate funds | Austin, TX 78730 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EVENDITUE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | PAC payroll taxes |
| | |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| Date | Davisa nama |
| Date | Payee name |
| 10/31/2019 | ADP |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$3,409.72 | 6500 River Pl Blvd Bldg 7 Ste 150 |
| • • | · · · · · · · · · · · · · · · · · · · |
| Expenditure from corporate funds | Austin, TX 78730 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | PAC payroll taxes |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | |
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SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Com

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 4/22 Rpt: 8/27 | Texas Leads PAC 00083815 |
| 4 Date | 5 Payee name |
| 11/08/2019 | ADP |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$121.32 | 6500 River PI Blvd Bldg 7 Ste 150 |
| | |
| X Expenditure from corporate funds | Austin, TX 78730 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITORE | Check if Austin, TX, officeholder living expense |
| | PAC payroll fees |
| | |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 11/29/2019 | ADP |
| | |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$2,669.42 | 6500 River PI Blvd Bldg 7 Ste 150 |
| X Expenditure from corporate funds | Austin, TX 78730 |
| corporate failes | |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense |
| | PAC payroll taxes |
| | |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 11/29/2019 | ADP |
| | |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$291.60 | 6500 River PI Blvd Bldg 7 Ste 150 |
| | |
| Expenditure from corporate funds | Austin, TX 78730 |
| • | |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense |
| | PAC payroll taxes |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | 1 |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

se Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment | |
|---|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 5/22 Rpt: 9/27 | Texas Leads PAC 00083815 |
| | l l |
| 4 Date | 5 Payee name |
| 12/06/2019 | ADP |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$114.61 | 6500 River Pl Blvd Bldg 7 Ste 150 |
| | |
| X Expenditure from corporate funds | Austin, TX 78730 |
| 8 PURPOSE | (b) Description |
| OF | (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | PAC payroll fees |
| | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| Data | |
| Date | Payee name |
| 08/15/2019 | Amazon.com |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$49.99 | PO Box 81226 |
| | |
| X Expenditure from corporate funds | Seattle, WA 98108-1226 |
| PURPOSE | |
| OF | |
| EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | PAC office supplies |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| Data | Davies rema |
| Date | Payee name |
| 08/21/2019 | Amazon.com |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$31.99 | PO Box 81226 |
| Expenditure from | |
| x corporate funds | Seattle, WA 98108-1226 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Office Overhead/Rental Expense |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | PAC office supplies |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | H |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commi

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Candidate/Officeholder/Politica Credit Card Payment | Il 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 F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 6/22 Rpt: 10/27 | Texas Leads PAC 00083815 |
| 4 Date | 5 Payee name |
| 08/22/2019 | Amazon.com |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$974.24 | PO Box 81226 |
| - " | |
| X Expenditure from corporate funds | Seattle, WA 98108-1226 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | PAC office equipment |
| | The emes equipment |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | 1 |
| Date | Payee name |
| 09/23/2019 | Atchley & Associates |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$162.50 | 1005 La Posada Dr |
| | |
| X Expenditure from corporate funds | Austin, TX 78752 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | PAC accounting fees |
| | The accounting ices |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| Date | Dougo nama |
| 08/23/2019 | Payee name Automated Signature Technology |
| | |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$9,473.00 | 112 Oakgrove Rd Ste 107 |
| X Expenditure from corporate funds | Sterling, VA 20166 |
| Corporate failes | |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | PAC office equipment |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | 1 |
| | |
| | |
| | |

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Candidate/Officeholder/Politica Credit Card Payment | Il 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 F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 7/22 Rpt: 11/27 | Texas Leads PAC 00083815 |
| 4 Date | 5 Payee name |
| 08/07/2019 | Bed Bath & Beyond |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$86.58 | 1201 Barbara Jordan Blvd |
| | |
| X Expenditure from corporate funds | Austin, TX 78723 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | PAC office furniture |
| | The office fairmare |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| · | |
| Date | Payee name |
| 08/08/2019 | Bed Bath & Beyond |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$101.73 | 1201 Barbara Jordan Blvd |
| | |
| X Expenditure from corporate funds | Austin, TX 78723 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Office Overhead/Rental Expense |
| | Check if Austin, TX, officeholder living expense |
| | PAC office furniture |
| 2 1 2 2 1 1 2 1 1 | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | |
| Date | Payee name |
| 08/06/2019 | Best Buy |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$173.19 | 1201 Barbara Jordan Blvd |
| | |
| X Expenditure from corporate funds | Austin, TX 78723 |
| PURPOSE | |
| OF | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | PAC equipment |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | -1 |
| | |
| | |
| | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
rertising Expense Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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)

| Credit Card Payment | The Instruction Guide explains how to comple | te this form. |
|--|---|---|
| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| Sch: 8/22 Rpt: 12/27 | Texas Leads PAC | 00083815 |
| 4 Date | 5 Payee name | <u>'</u> |
| 10/01/2019 | Burridge, Tyler | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| \$2,955.20 | 68 Oleander Ct | |
| | | |
| Expenditure from corporate funds | Lake Jackson, TX 77566 | |
| 8 PURPOSE | | Description |
| OF | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Galarios, Wagos, Gorill act Labor | Check if Austin, TX, officeholder living expense |
| | | PAC staff salary |
| | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought | Office held |
| expenditure to benefit C/Oi | 7 | |
| Date | Payee name | |
| 10/31/2019 | Burridge, Tyler | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$2,955.20 | 68 Oleander Ct | |
| | | |
| Expenditure from corporate funds | Lake Jackson, TX 77566 | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) | Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor | Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense PAC staff salary |
| | | FAC stall salary |
| Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| expenditure to benefit C/OI | | Cindo nola |
| Date | Device name | |
| 11/29/2019 | Payee name Burridge, Tyler | |
| | , | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$1,477.60 | 68 Oleander Ct | |
| Expenditure from | | |
| corporate funds | Lake Jackson, TX 77566 | |
| PURPOSE OF | , | Description |
| EXPENDITURE | Salaries/Wages/Contract Labor | Check if travel outside of Texas. Complete Schedule T. |
| | | Check if Austin, TX, officeholder living expense PAC staff salary |
| | | ··· -···, |
| Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| expenditure to benefit C/OI | | 22 |
| | | |
| | | |
| | | |

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

| Candidate/Officeholder/Politica Credit Card Payment | | |
|--|--|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) | |
| Sch: 9/22 Rpt: 13/27 | Texas Leads PAC 00083815 | |
| 4 Date | 5 Payee name | |
| 08/29/2019 | Durand, Samantha | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| \$716.11 | 5608 Avenue F Apt 121 | |
| Expenditure from | | |
| X corporate funds | Austin, TX 78751 | |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | |
| | PAC staff salary | |
| | | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | _ |
| expenditure to benefit C/OI | H | |
| Date | Payee name | _ |
| 08/29/2019 | Durand, Samantha | |
| Amount (\$) | Payee address; City; State; Zip Code | _ |
| \$2,864.43 | 5608 Avenue F Apt 121 | |
| | | |
| Expenditure from corporate funds | Austin, TX 78751 | |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | |
| | PAC staff salary | |
| | 1710 Stail States | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | _ |
| expenditure to benefit C/OI | н | |
| Date | Payee name | _ |
| 10/01/2019 | Durand, Samantha | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$716.11 | 5608 Avenue F Apt 121 | |
| | | |
| X Expenditure from corporate funds | Austin, TX 78751 | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | _ |
| OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. | |
| LA LABITONE | Check if Austin, TX, officeholder living expense | |
| | Mileage to attend PAC events | |
| Complete <u>ONLY</u> if direct | Candidate/Officeholder name Office sought Office held | _ |
| expenditure to benefit C/OI | o | |
| | | _ |
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | mmittee | Gift/Awards/Memoria Legal Services The Instruction (| | | /ages | s/Contract Labor | | Travel Out of Dis OTHER (enter a | strict category not listed | above) |
|---|--|-----|-----------------|--|-----------------------|------------|-------|------------------|--------|---|--------------------------------|---------------|
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | | | 3 | Filer ID | (Ethics Commi | ssion Filers) |
| | Sch: 10/22 Rpt: 14/27 | | Texas Lead | | | | | | | 00083815 | • | ŕ |
| 4 | Date | 5 | Payee name | | | | | | | | | |
| | 10/01/2019 | | Durand, Sar | nantha | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee addres | ss; City; | State | e; Zip Co | de | | | | | |
| | \$2,864.43 | | 5608 Avenu | e F Apt 121 | | | | | | | | |
| | Expenditure from corporate funds | | Austin, TX 7 | 8751 | | | | | | | | |
| 8 | PURPOSE | (a) | Category (Se | e Categories listed a | t the top of this sch | hedule) | (b) | Description | | | | |
| | OF EXPENDITURE | | | ges/Contract | | | | = | ı, TX, | officeholder living | plete Schedule T. g expense | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | | Candidate/Offic | ceholder name | (| Office sou | ght | | | Office he | eld | |
| | Date | | Payee name | | | | | | | | | |
| | 10/31/2019 | | Durand, Sar | nantha | | | | | | | | |
| | Amount (\$) | | Payee addres | ss; City; | State | e; Zip Co | de | | | | | |
| | \$716.11 | | 5608 Avenu | e F Apt 121 | | | | | | | | |
| | - Company diagram | | | | | | | | | | | |
| Х | Expenditure from corporate funds | | Austin, TX 7 | 8751 | | | | | | | | |
| | PURPOSE | (a) | Category (Se | e Categories listed a | t the top of this sch | hedule) | (b) | Description | | | | |
| | OF EXPENDITURE | | Travel In Dis | strict | | | | = | | | plete Schedule T. | |
| | | | | | | | | Mileage to att | | officeholder living | | |
| | | | | | | | | will cage to all | icii | a i ne even | 113 | |
| | Complete ONLY if direct expenditure to benefit C/OI | | Candidate/Offic | ceholder name | (| Office sou | ght | | | Office he | eld | |
| | Date | | Payee name | | | | | | | | | |
| | 10/31/2019 | | Durand, Sar | mantha | | | | | | | | |
| | Amount (\$) | | Payee addres | ss; City; | State | e; Zip Co | de | | | | | |
| | \$2,864.43 | | 5608 Avenu | e F Apt 121 | | | | | | | | |
| X | Expenditure from corporate funds | | Austin, TX 7 | 8751 | | | | | | | | |
| | PURPOSE OF | (a) | | e Categories listed a | | hedule) | (b) | Description | | | | |
| | EXPENDITURE | | Salaries/Wa | ges/Contract | Labor | | | | | de of Texas. Com officeholder living | plete Schedule T. | |
| | | | | | | | | PAC staff sal | | | , expense | |
| | | | | | | | | | - | | | |
| | Complete ONLY if direct | | Candidate/Offic | ceholder name | (| Office sou | ght | | | Office h | eld | |
| | expenditure to benefit C/OI | п | | | | | | | | | | |
| | | | | | | | | | | | | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Candidate/Officeholder/Politica Credit Card Payment | I 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 F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 11/22 Rpt: 15/27 | Texas Leads PAC 00083815 |
| 4 Date | 5 Payee name |
| 08/29/2019 | Garza, Oscar |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$5,666.91 | 201 E 4th St #226 |
| X Expenditure from | Augtin TV 70701 |
| — corporate farias | Austin, TX 78701 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | PAC staff salary |
| | |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 08/29/2019 | Garza, Oscar |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$2,428.67 | 201 E 4th St #226 |
| | |
| Expenditure from corporate funds | Austin, TX 78701 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | PAC staff salary |
| | The dail eatery |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| Date | Payee name |
| 10/01/2019 | Garza, Oscar |
| | |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$5,666.91 | 201 E 4th St #226 |
| X Expenditure from corporate funds | Austin, TX 78701 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor |
| LXI LINDITORE | Check if Austin, TX, officeholder living expense |
| | PAC staff salary |
| Occupations Children | On didn't 10 ff a balden name |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | |
| | |
| | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

| Credit Card Payment | The Instruction Guide explains how to complete this form. |
|--|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 12/22 Rpt: 16/27 | Texas Leads PAC 00083815 |
| 4 Date | 5 Payee name |
| 10/01/2019 | Garza, Oscar |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$2,428.67 | 201 E 4th St #226 |
| | |
| Expenditure from corporate funds | Austin, TX 78701 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense PAC staff salary |
| | 1770 Stair Statery |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| Dete | |
| Date | Payee name |
| 10/31/2019 | Garza, Oscar |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$5,666.91 | 201 E 4th St #226 |
| Expenditure from | |
| corporate funds | Austin, TX 78701 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense |
| | PAC staff salary |
| Commission ONLY if discost | Candidate/Officeholder name Office sought Office held |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | |
| · | |
| Date | Payee name |
| 10/31/2019 | Garza, Oscar |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$2,428.67 | 201 E 4th St #226 |
| Evponditure from | |
| Expenditure from corporate funds | Austin, TX 78701 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor |
| EXPENDITORE | Check if Austin, TX, officeholder living expense |
| | PAC staff salary |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| SAPORALLIO TO BOHOR OF | • |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | l Committee 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 h | · · · · · · · · · · · · · · · · · · · | |
| 1 Total pages Schedule F1: Sch: 13/22 Rpt: 17/27 | 2 FILER NAME Texas Leads PAC | | 3 Filer ID (Ethics Commission Filers) 00083815 |
| · | | | |
| 4 Date | 5 Payee name | | |
| 11/29/2019 | Garza, Oscar | | |
| 6 Amount (\$) \$8,095.58 | 7 Payee address; City; State; 201 E 4th St #226 | Zip Code | |
| X Expenditure from corporate funds | Austin, TX 78701 | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this sche Salaries/Wages/Contract Labor | Check if travel of | outside of Texas. Complete Schedule T. TX, officeholder living expense ATY |
| Complete <u>ONLY</u> if direct expenditure to benefit C/Oh | | ffice sought | Office held |
| Date | Payee name | | |
| 08/01/2019 | H-E-B | | |
| Amount (\$) | Payee address; City; State; | Zip Code | |
| \$121.85 | 500 Canyon Ridge Dr | · | |
| X Expenditure from corporate funds | Austin, TX 78753 | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this school Office Overhead/Rental Expense | Check if travel of | outside of Texas. Complete Schedule T. TX, officeholder living expense pplies |
| Complete ONLY if direct expenditure to benefit C/OF | | office sought | Office held |
| Date | Payee name | | |
| 07/31/2019 | Hiscox Business Insurance | | |
| Amount (\$) \$674.00 | Payee address; City; State; 104 S Michigan Ave Ste 600 | Zip Code | |
| X Expenditure from corporate funds | Chicago, IL 60603 | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this scheen Office Overhead/Rental Expense | Check if travel of | outside of Texas. Complete Schedule T. TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OF | | ffice sought | Office held |
| | | | |

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Candidate/Officeholder/Politica Credit Card Payment | Il 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 F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 14/22 Rpt: 18/27 | Texas Leads PAC 00083815 |
| 4 Date | 5 Payee name |
| 08/01/2019 | IKEA |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$896.85 | 1 IKEA Way |
| | |
| X Expenditure from corporate funds | Round Rock, TX 78665 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense PAC office furniture |
| | 1 Ac office fairficate |
| O Commission ONLY if dispose | Condidate/Office helder name Office accepts |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| <u> </u> | |
| Date | Payee name |
| 08/29/2019 | McDougald, Kolton |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$3,432.52 | 12635 Duchess Ln |
| | |
| Expenditure from corporate funds | Houston, TX 77070 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor |
| EXPENDITORE | Check if Austin, TX, officeholder living expense |
| | PAC staff salary |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| Date | Payee name |
| 10/01/2019 | McDougald, Kolton |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$3,432.52 | 12635 Duchess Ln |
| 70,100.00 | |
| Expenditure from corporate funds | Houston, TX 77070 |
| • | 1 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) Salaries/Mages/Contract Labor Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | PAC staff salary |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| | |
| | |
| | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Candidate/Officenolder/Political | The Instruction Guide explains how to complete this form. |
|----------------------------------|--|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 15/22 Rpt: 19/27 | Texas Leads PAC 00083815 |
| 4 Date | 5 Payee name |
| 10/31/2019 | McDougald, Kolton |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$3,432.52 | 12635 Duchess Ln |
| | |
| Expenditure from corporate funds | Houston, TX 77070 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | PAC staff salary |
| | The state |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| Data | Para and a second secon |
| Date 08/01/2019 | Payee name |
| | Office Depot |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$300.97 | 816 Tirado |
| X Expenditure from | A T.V. 70750 |
| corporate funds | Austin, TX 78752 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | PAC office supplies |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| Date | Payee name |
| 08/05/2019 | Office Depot |
| | |
| Amount (\$) \$259.77 | Payee address; City; State; Zip Code 816 Tirado |
| φ 2 59.77 | 610 Tilado |
| X Expenditure from | A TV 70750 |
| corporate funds | Austin, TX 78752 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | PAC office furniture |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| | |
| | |
| | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Cor Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 1 Total pages Schedule F1: Sch: 16/22 Rpt: 20/27 | 2 FILER NAME Texas Leads PAC 3 Filer ID (Ethics Commission Filers) 00083815 |
| 4 Date 08/05/2019 | 5 Payee name Office Depot |
| 6 Amount (\$) \$259.77 | 7 Payee address; City; State; Zip Code 907 W 5th St |
| X Expenditure from corporate funds | Austin, TX 78701 |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PAC office furniture |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| Date 08/27/2019 | Payee name Office Depot |
| Amount (\$) \$57.13 | Payee address; City; State; Zip Code 907 W 5th St |
| X Expenditure from corporate funds | Austin, TX 78701 |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PAC office supplies |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| Date 07/31/2019 | Payee name San Antonio St Partners LLC |
| Amount (\$) \$1,227.50 | Payee address; City; State; Zip Code 1402 San Antonio St |
| X Expenditure from corporate funds | Austin, TX 78701 |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PAC office rent |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | |

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) |
|--|---|
| 4 T . 1 | The Instruction Guide explains how to complete this form. |
| 1 Total pages Schedule F1: | |
| Sch: 17/22 Rpt: 21/27 | Texas Leads PAC 00083815 |
| 4 Date | 5 Payee name |
| 07/31/2019 | San Antonio St Partners LLC |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$1,200.00 | 1402 San Antonio St |
| ,-, | |
| Expenditure from | Aughin TV 70701 |
| corporate funds | Austin, TX 78701 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense PAC office rent |
| | PAC office ferit |
| | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| experialitie to belieff C/O | |
| Date | Payee name |
| 09/01/2019 | San Antonio St Partners LLC |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$1,227.50 | 1402 San Antonio St |
| Ψ1,227.50 | 1402 San Antonio St |
| X Expenditure from | |
| corporate funds | Austin, TX 78701 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Office Overhead/Rental Expense |
| | Check if Austin, TX, officeholder living expense |
| | PAC office rent |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| experiditure to beliefit C/O | |
| Date | Payee name |
| 09/01/2019 | San Antonio St Partners LLC |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$1,200.00 | 1402 San Antonio St |
| Ψ1,200.00 | 1402 San Antonio St |
| Expenditure from | |
| corporate funds | Austin, TX 78701 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Office Overhead/Rental Expense |
| EXI ENDITORE | Check if Austin, TX, officeholder living expense |
| | PAC office rent |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | 1 |
| | |
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| | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Candidate/Officenoider/Politica Credit Card Payment | The Instruction Guide explains how to complete this form. | |
|--|---|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) | _ |
| Sch: 18/22 Rpt: 22/27 | Texas Leads PAC 00083815 | |
| 4 Date | 5 Payee name | |
| 10/01/2019 | San Antonio St Partners LLC | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| \$1,227.50 | 1402 San Antonio St | |
| Expenditure from corporate funds | Austin, TX 78701 | |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| OF EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. | |
| | Check if Austin, TX, officeholder living expense PAC office rent | |
| | The office fell | |
| Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held | |
| experientere to benefit 6/01 | <u>'</u> | |
| Date | Payee name | |
| 10/01/2019 | San Antonio St Partners LLC | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$1,200.00 | 1402 San Antonio St | |
| Expenditure from corporate funds | Austin, TX 78701 | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| OF EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. | |
| | Check if Austin, TX, officeholder living expense PAC office rent | |
| | TAC UNICE TERE | |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held | _ |
| Date | Payee name | _ |
| 11/01/2019 | San Antonio St Partners LLC | |
| Amount (\$) | Payee address; City; State; Zip Code | _ |
| \$1,227.50 | 1402 San Antonio St | |
| | | |
| X Expenditure from corporate funds | Austin, TX 78701 | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description | |
| OF EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | |
| | PAC office rent | |
| | | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | _ |
| expenditure to benefit C/O | | |
| | | _ |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political (Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 19/22 Rpt: 23/27 | Texas Leads PAC 00083815 |
| 4 Date | 5 Payee name |
| 11/01/2019 | San Antonio St Partners LLC |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$1,200.00 | 1402 San Antonio St |
| | |
| Expenditure from corporate funds | Austin, TX 78701 |
| | |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | PAC office rent |
| | PAC office felic |
| | |
| Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 11/30/2019 | San Antonio St Partners LLC |
| Amount (\$) | Payee address; City; State; Zip Code |
| ` ' | |
| \$2,427.50 | 1402 San Antonio St |
| Expenditure from | |
| x corporate funds | Austin, TX 78701 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Office Overhead/Rental Expense |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | PAC office rent |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| | |
| Date | Payee name |
| 07/31/2019 | San Antonio St Partners LLC |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$2,322.50 | 1402 San Antonio St |
| | |
| X Expenditure from | A |
| corporate funds | Austin, TX 78701 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Office Overhead/Rental Expense |
| EXPENDITORE | Check if Austin, TX, officeholder living expense |
| | PAC office deposit |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | 1 |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 20/22 Rpt: 24/27 | Texas Leads PAC 00083815 |
| 4 Date | 5 Payee name |
| 08/28/2019 | Time Warner Cable |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$236.53 | Spectrum Business |
| Expenditure from | PO Box 60074 |
| x corporate funds | City of Industry, CA 91716 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Office Overhead/Rental Expense |
| | Check if Austin, TX, officeholder living expense |
| | PAC telecommunications |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| Date | Payee name |
| 09/25/2019 | Time Warner Cable |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$125.40 | Spectrum Business |
| | PO Box 60074 |
| X Expenditure from corporate funds | City of Industry, CA 91716 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense PAC telecommunications |
| | TAC telecommunications |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | |
| Date | Payee name |
| 10/30/2019 | TIme Warner Cable |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$127.70 | Spectrum Business |
| Evnanditura fra | PO Box 60074 |
| X Expenditure from corporate funds | City of Industry, CA 91716 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Office Overhead/Rental Expense |
| | Check if Austin, TX, officeholder living expense |
| | PAC telecommunications |
| Complete <u>ONLY</u> if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| | |
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 21/22 Rpt: 25/27 | Texas Leads PAC 00083815 |
| 4 Date | 5 Payee name |
| 11/19/2019 | Time Warner Cable |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$127.70 | Spectrum Business |
| Expenditure from | PO Box 60074 |
| x corporate funds | City of Industry, CA 91716 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Office Overhead/Rental Expense |
| | Check if Austin, TX, officeholder living expense PAC telecommunications |
| | TAC telecommunications |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | 1 |
| Date | Payee name |
| 07/31/2019 | Texas Mutual Insurance Co |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$980.00 | 2200 Aldrich St |
| — Forestitus from | |
| X Expenditure from corporate funds | Austin, TX 78723 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense PAC insurance |
| | FAC IIIsulance |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | 1 |
| Date | Payee name |
| 08/14/2019 | USPS |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$110.00 | 823 Congress Ave Ste 150 |
| Expenditure from | |
| corporate funds | Austin, TX 78701 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense PAC postage |
| | The postage |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Comn

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
TTALE (Control of State Control of C

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | | Gilt/Awards/Memorial Legal Services The Instruction G | | | ages | /Contract Labor | | OTHER (enter a | istrict a category not listed above) | |
|---|--|----------|-----------------|---|--------------------|-------------|------|--------------------|--------|--------------------|---|----------|
| _ | Total massas Cabadula E1. | 1 | | | • | | • | 1 | _ | Files ID | (Ethica Commission Filoro) | \dashv |
| | Total pages Schedule F1: | ı | | | | | | | | Filer ID | (Ethics Commission Filers) | |
| | Sch: 22/22 Rpt: 26/27 | | Texas Lead | s PAC | | | | | | 00083815 | | |
| 4 | Date | 5 | Payee name | | | | | | | | | |
| | 08/14/2019 | ı | Wayfair | | | | | | | | | |
| | | _ | | | | | | | | | | _ |
| 6 | Amount (\$) | 7 | Payee addres | ss; City; | Stat | e; Zip Co | de | | | | | |
| | \$155.86 | | 4 Copley PI, | FI 7 | | | | | | | | |
| | | | | | | | | | | | | |
| Х | Expenditure from | | Poston MA | 02116-0000 | | | | | | | | |
| | corporate funds | | BUSIUH, IVIA | 02110-0000 | | | | | | | | |
| 8 | PURPOSE | (a) | Category (Se | e Categories listed at | the top of this so | chedule) | (b) | Description | | | | |
| | OF EXPENDITURE | | Office Overl | nead/Rental Ex | pense | | | Check if travel of | outsio | de of Texas. Con | nplete Schedule T. | |
| | LAFLINDITORL | | | | | | | Check if Austin, | TX, | officeholder livin | g expense | |
| | | | | | | | | PAC office ful | rnit | ure | | |
| | | | | | | | | | | | | |
| 9 | Complete ONLY if direct | | Candidate/Offic | ceholder name | | Office sou | ght | | | Office h | eld | |
| | expenditure to benefit C/O | Н | | | | | | | | | | |
| | Date | | Payee name | | | | | | | | | = |
| | 08/26/2019 | ı | Wayfair | | | | | | | | | |
| | | _ | | City II | Ctat | a. 7ia Ca | al a | | | | | 4 |
| | Amount (\$) | ı | Payee addres | | Slai | e; Zip Co | ue | | | | | |
| | \$23.79 | | 4 Copley PI, | FI 7 | | | | | | | | |
| | | | | | | | | | | | | |
| Х | Expenditure from corporate funds | | Boston, MA | 02116-0000 | | | | | | | | |
| | PURPOSE | (a) | Category (Se | e Categories listed at | the ton of this se | chedule) | (b) | Description | | | | _ |
| | OF | | | nead/Rental Ex | | Sileduic) | ` ' | : | outsio | de of Texas. Con | nplete Schedule T. | |
| | EXPENDITURE | | Office Overi | icaa/itciitai Ex | рспос | | | Check if Austin, | TX, | officeholder livin | g expense | |
| | | | | | | | | PAC office fur | rnit | ure | | |
| | | | | | | | | | | | | |
| _ | Complete ONLY if direct | <u> </u> | Candidato/Offi | ceholder name | | Office sour | aht | | | Office h | old | _ |
| | Complete ONLY if direct expenditure to benefit C/O | | zanuluale/Oni | ceriolaer name | | Office sou | JIII | | | Office II | eiu | |
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INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 27/27 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Texas Leads PAC 00083815 4 Date 5 Name of person from whom amount is received 8 Amount (\$) 10/21/2019 **ADP** \$475.20 6 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78730 7 Purpose for which amount is received Check if political contribution returned to filer Refund